

Notice of Privacy Practices

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Hearing West Texas (ATEC Group, LLC) is required by law to maintain the privacy of your health information and to provide you with notice of its legal duties and privacy practices with respect to your health information. If you have questions about any part of this notice or if you want more information about the privacy practices at Hearing West Texas please contact:

Hearing West Texas (ATEC Group, LLC), 855 Central Suite 16, Odessa, TX 79761, 432-296-6617

Privacy Officer = Karen Wallis Villaseñor

Effective Date of This Notice: January 1, 2008

I. How Hearing West Texas may Use or Disclose Your Health Information

Hearing West Texas collects health information from you and stores it in a chart and on a computer. This is your medical record. The medical record is the property of Hearing West Texas, but the information in the medical record belongs to you. Hearing West Texas protects the privacy of your health information. The law permits Hearing West Texas to use or disclose your health information for the following purposes:

1. Treatment. We may use your information to provide, coordinate, and manage your care and treatment. For Example, Hearing West Texas may share your medical information with a physician for a consultation or a referral.
2. Payment. We may use and disclose medical information about you so that the treatment and services you receive may be billed to, and payment may be collected from, you an insurance company, or another third party. For example, we may need to give your health plan information treatment you received at Hearing West Texas so your health plan will pay us or reimburse you for the treatment.
3. Regular Health Care Operations. We may use and disclose medical information about you for Hearing West Texas's health care operations. Health care operations are the uses and disclosures of information that are necessary to run Hearing West Texas and to make sure that all of our customers receive quality care. For example, we may use medical information to evaluate the performance of our staff in caring for you.
4. Information provided to you.
5. Directory. We may list your name, where you are located in our facilities, your general medical condition and your religious affiliation in our directory. This information may be provided to members of the clergy. This information, except your religious affiliation, may be provided to other people who ask for you by name. If you do not want us to list this information in our directory and provide it to clergy and others, you must tell us that you object.
6. Notification and communication with family. We may disclose your health information to notify or assist in notifying a family member, your personal representative or another person responsible for your care about your location, your general condition or in the event of your death. If you are able and available to agree or object, we will give you the opportunity to object prior to making this notification. If you are unable or unavailable to agree or object, our health professionals will use their best judgment in communication with your family and others.
7. Required by law. As required by law, we may use and disclose your health information.
8. Public health. As required by law, we may disclose your health information to public health authorities for purposes related to: preventing or controlling disease, injury or disability; reporting child abuse or neglect; reporting domestic violence; reporting to the Food and Drug Administration problems with products and reactions to medications; and reporting disease or infection exposure.

9. Health oversight activities. We may disclose your health information to health agencies during the course of audits, investigations, inspections, licensure and other proceedings.
10. Judicial and administrative proceedings. We may disclose your health information in the course of any administrative or judicial proceeding.
11. Law enforcement. We may disclose your health information to a law enforcement official for purposes such as identifying or locating a suspect, fugitive, material witness or missing person, complying with a court order or subpoena and other law enforcement purposes.
12. Deceased person information. We may disclose your health information to coroners, medical examiners and funeral directors.
13. Research. We may disclose your health information to researchers conducting research that has been approved by an Institutional Review Board or Privacy Board.
14. Public safety. We may disclose your health information to appropriate persons in order to prevent or lessen a serious and imminent threat to the health or safety of a particular person or the general public.
15. Worker's compensation. We may disclose your health information as necessary to comply with worker's compensation laws.
16. Marketing. We may contact you to provide appointment reminders or to give you information about other treatments or health-related benefits and services that may be of interest to you.
17. Change of Ownership. In the event that Hearing West Texas is sold or merged with another organization, your health information/record will become the property of the new owner.

II. When Hearing West Texas May Not Use or Disclose Your Health Information

Except as described in this Notice of Privacy Practices, Hearing West Texas will not use or disclose your health information without your written authorization. If you do authorize Hearing West Texas to use or disclose your health information for another purpose, you may revoke your authorization in writing at any time.

III. Your Health Information Rights

1. You have the right to request restrictions on certain uses and disclosures of your health information. Hearing West Texas is not required to agree to the restriction that you requested.
2. You have the right to receive your health information through a reasonable alternative means or at an alternative location. For example, you can ask that we only contact you only at work or only by mail. To request confidential communications, you must make your request in writing to Hearing West Texas. We will not ask you the reason for your request. We will accommodate all reasonable requests. Your request must specify how or where you wish to be contacted, and we may require you to provide information about how payment will be handled.
3. You have the right to inspect and copy your health information.
4. You have a right to request that Hearing West Texas amend your health information that is incorrect or incomplete. Hearing West Texas is not required to change your health information and will provide you with information about Hearing West Texas denial and how you can disagree with the denial.
5. You have a right to receive an accounting of disclosures of your health information made by Hearing West Texas, except that Hearing West Texas does not have to account for the disclosures described in parts 1 (treatment), 2 (payment), 3 (health care operations), 4 (information provided to you), 5 (directory listings) and 16 (certain government functions) of section I of this Notice of Privacy Practices.

6. You have a right to a paper copy of this Notice of Privacy Practices.

If you would like to have a more detailed explanation of these rights or if you would like to exercise one or more of these rights, contact

Privacy Officer = Karen Wallis Villaseñor

IV. Changes to this Notice of Privacy Practices

Hearing West Texas reserves the right to amend this Notice of Privacy Practices at any time in the future, and to make the new provisions effective for all information that it maintains, including information that was created or received prior to the date of such amendment. Until such amendment is made, Hearing West Texas is required by law to comply with this Notice.

The effective date of this notice is January 1, 2008. We reserve the right to change this notice. We reserve the right to make the revised or changed notice effective for medical information we already have about you, as well as any information we receive in the future. If the terms of this notice are changed, Hearing West Texas will provide you with a revised notice upon request, and we will post the revised notice in designated locations.

V. Complaints

Complaints about this Notice of Privacy Practices or how Hearing West Texas handles your health information should be directed to:

Privacy Officer = Karen Wallis Villaseñor

If you are not satisfied with the manner in which this company handles a complaint, you may submit a formal complaint to:

Department of Health and Human Services
Office of Civil Rights
Hubert H. Humphrey Bldg.
200 Independence Avenue, S.W.
Room 509F HHH Building
Washington, DC 20201

You may also address your complaint to one of the regional Offices for Civil Rights. A list of these offices can be found online at <http://www.hhs.gov/ocr/regmail.html>.

We have created this email privacy policy to demonstrate our firm commitment to your privacy and the protection of your information.

This policy was created on January 1, 2008.