**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.**

The Health Insurance Portability and Accountability Act of 1996 (“HIPAA”) is a federal program that requires that all medical records and other individually identifiable health information used or disclosed by us in any form, whether electronically, on paper, or orally, are kept properly confidential. HIPAA provides you, the patient, significant rights to understand and control how your health information is used. Additionally, HIPAA provides penalties for covered entities that misuse personal health information.

As required by HIPAA, ReFocus has prepared this explanation of how we are required to maintain the privacy of your health information and how we may disclose your health information.

ReFocus may use and disclose your medical records only for each of the following purposes: treatment; payment; and healthcare options.

* **Treatment:** providing, coordinating, or managing health care or related services by one or more healthcare providers. An example would include a physical examination.
* **Payment:** such activities as obtaining reimbursement for services confirming coverage, billing, or collection activities, and utilization review. An example of this would be sending a bill for your visit to your insurance company for payment.
* **Healthcare Options:** includes the business aspects of running our practice, such as conducting quality assessment and improvement activities, auditing functions, and cost-management analysis and customer service. An example would be internal quality assessment review.

ReFocus may create and distribute de-identified health information by removing references to individually identifiable information. ReFocus reserves the right to change the terms of our Notice of Privacy Procedure and make the new notice provisions effective for all protected health information we maintain. ReFocus will post and you may request a written copy of the Notice of Privacy Practices form.

You have recourse if you feel your privacy protections have been violated. You have the right to file a written complaint to ReFocus or to the U.S. Department of Health and Human Services: Office of Civil Rights about the violations of provisions of this notice or the policies and procedures of ReFocus. ReFocus will not retaliate against you for filing a complaint.

**PLEASE CONTACT US AT OUR WATERBURY, CT LOCATION FOR ADDITIONAL INFORMATION:**

**ReFocus Eye Health**

87 Grandview Avenue, Suite B

Waterbury, CT 06708

Privacy Officer: Rabia Hamid, Director of Quality, Safety, and Compliance

rabia.hamid@refocuseye.com

**To File a HIPAA Complaint:**

**U.S. Department of Health and Human Services: Office of Civil Rights**

200 Independence Avenue, S.W.

Washington, D.C. 20201

Phone: (202) 619- 0257 or Toll-Free: (877) 696- 6775