Notice of Privacy Practices

Effective Date: July 13, 2026

Last Reviewed: July 13, 2026

Applies To: Protected health information maintained by Smart Health Acupuncture

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

Our Commitment to Your Privacy

At Smart Health Acupuncture, protecting the privacy of your medical information is an important part of the care we provide. Federal law requires us to maintain the privacy and security of your protected health information, provide you with this Notice, follow the terms of the Notice currently in effect, and notify you if a breach of unsecured protected health information occurs.

Protected health information includes information that identifies you and relates to your past, present, or future physical or mental health, the healthcare you receive, or payment for that healthcare.

Smart Health Acupuncture maintains the confidentiality of your protected health information in accordance with applicable federal and California law.

This Notice describes how we may use and disclose your protected health information, the rights available to you, and our responsibilities regarding that information.

How We May Use and Disclose Your Information

The law permits or requires us to use and disclose protected health information for certain purposes without obtaining your written authorization.

Treatment

We may use and disclose your protected health information to provide, coordinate, or manage your healthcare.

Examples include:

- Documenting your medical history, examination findings, diagnoses, treatment plans, and progress.
- Reviewing laboratory results, imaging studies, and medical records that you provide.
- Coordinating care with another healthcare professional involved in your treatment when appropriate.
- Referring you for laboratory testing, imaging, or other healthcare services.
- Consulting with another healthcare provider regarding your care as permitted by law.

Payment

We may use and disclose your protected health information to obtain payment for services provided.

Examples include:

- Verifying insurance eligibility and benefits.

- Submitting insurance claims.
- Responding to requests from your health plan.
- Obtaining prior authorization when required.
- Collecting payment for services rendered.

Healthcare Operations

We may use and disclose protected health information for activities necessary to operate and improve our practice.

Examples include:

- Quality assessment and improvement.
- Compliance activities.
- Internal audits.
- Risk management.
- Professional review.
- Staff or contractor training.
- Licensing and credentialing.
- Business planning and administration.

Business Associates

Certain service providers perform functions on our behalf that may require access to protected health information.

When required by law, these organizations are contractually obligated to appropriately safeguard protected health information through Business Associate Agreements.

Examples may include electronic health record providers, billing services, claims clearinghouses, secure communication providers, and technology vendors supporting healthcare operations.

Other Uses and Disclosures

We may use or disclose protected health information when required or permitted by law, including for:

- Public health activities.
- Reporting suspected abuse, neglect, or domestic violence when authorized or required.
- Health oversight activities.
- Judicial or administrative proceedings.
- Law enforcement purposes.
- Coroners, medical examiners, and funeral directors.

- Organ and tissue donation where applicable.
- Workers' compensation.
- Specialized government functions.
- Research when legally authorized.
- Preventing or reducing a serious threat to health or safety.
- Other purposes required by federal or California law.

We will limit disclosures to the information reasonably necessary for the permitted purpose when the minimum-necessary standard applies.

Uses Requiring Written Authorization

Except where permitted or required by law, we will obtain your written authorization before using or disclosing protected health information for purposes not described in this Notice.

Smart Health Acupuncture:

- Does not sell protected health information.
- Does not use protected health information for marketing activities that require patient authorization.
- Does not create or maintain psychotherapy notes.

You may revoke a written authorization at any time by submitting a written request, except to the extent that we have already acted in reliance on the authorization.

Your Choices

In certain situations, you may tell us how you want information shared.

These situations may include:

- Sharing information with family members, friends, caregivers, or others involved in your care or payment for your care.
- Sharing information during a disaster-relief situation.
- Including information in a facility directory, if such a directory is ever maintained.

We will generally follow your instructions when we are able to do so and when permitted by law.

If you are unable to communicate your preference, we may share information when we believe it is in your best interest or necessary to lessen a serious and imminent threat to health or safety, as permitted by law.

Your Rights

Right to Access Your Records

You may request to inspect or receive a copy of your medical and billing records and certain other protected health information maintained by the practice.

We may charge a reasonable, cost-based fee as permitted by law.

Certain information may be excluded from access when permitted by law.

Right to Request an Amendment

If you believe information in your record is incorrect or incomplete, you may request an amendment.

We may deny the request in certain circumstances permitted by law. If we deny the request, we will provide a written explanation.

Right to Request Confidential Communications

You may request that we communicate with you in a particular way or at a particular location.

We will accommodate reasonable requests.

Right to Request Restrictions

You may request restrictions on certain uses or disclosures of your protected health information.

We are not required to agree to every request.

If you pay in full out of pocket for a healthcare item or service, you may ask us not to disclose information about that item or service to your health plan for payment or healthcare operations. We will comply when required by law.

Right to an Accounting of Disclosures

You may request a list of certain disclosures of your protected health information made by the practice during the applicable legal period.

The accounting does not include disclosures excluded by law, including many disclosures made for treatment, payment, or healthcare operations.

Right to Choose a Representative

If you have given another person medical power of attorney or if another person is legally authorized to act on your behalf, that person may exercise your privacy rights as permitted by law.

We may require documentation establishing that authority.

Right to Receive a Copy of This Notice

You may request a paper or electronic copy of this Notice at any time.

Our Responsibilities

Smart Health Acupuncture is required by law to:

- Maintain the privacy and security of your protected health information.
- Provide you with this Notice.
- Follow the terms of the Notice currently in effect.
- Notify affected individuals following a breach of unsecured protected health information when required by law.
- Refrain from retaliating against you for exercising your privacy rights or filing a complaint.

Changes to This Notice

We reserve the right to revise this Notice.

A revised Notice may apply to protected health information already maintained by the practice as well as information received in the future.

The current Notice will be available in the office and on the Smart Health Acupuncture website.

Questions or Complaints

For questions, privacy requests, or complaints, contact the Privacy Officer at Smart Health Acupuncture.

You may also submit a complaint to the U.S. Department of Health and Human Services, Office for Civil Rights.

Smart Health Acupuncture will not retaliate against you for filing a complaint.

Privacy Officer
Smart Health Acupuncture
Phone: 619-881-0428
Email: contact@smarthealthacu.com