



Active Seattle  
CHIROPRACTIC • SPORTS THERAPY

## NOTICE TO PATIENTS

Active Seattle Chiropractic & Sports Therapy (ASCST) is bound by federal law under the Healthcare Information Portability and Accountability Act (HIPAA) to protect the privacy of your health information. The following details how your medical information may be used and disclosed, and your rights to access your information.

ASCST may use your information to send appointment reminders, bills, office policy updates and similar. We do not share or sell patient contact information for any marketing purpose. We are not responsible for the marketing and privacy policies of third-party companies we contract with to provide a service to you, such as online scheduling platforms.

General consent for release of medical records authorizes ASCST to disclose information in your medical record for treatment, and for payment and healthcare operations. Your information may be shared with:

- providers/administrators of ASCST who are treating or consulting in your direct care.
- your insurer or third-party payer who is responsible for paying all or part of the cost of your care, including necessary clinical information to obtain approval or authorization of treatment.
- other healthcare providers who are indirectly involved during a course of treatment at ASCST, such as referrals to/from co-managing providers or imaging facilities.

For specific disclosures not covered in the above section, you would be asked to sign a release of medical records in order to authorize ASCST to share specific information to a particular entity for a named purpose, such as record transfer to another office. You may revoke any consent or authorization provided to us by giving a written notice of revocation.

There are situations that require us by law to disclose your records regardless of authorization, such as a subpoena or ethical obligation to protect public health or patient safety. In Washington state, chiropractors are mandatory reporters. All disclosures will be limited to the minimum necessary.

Regarding access to your record, you have the right to:

- inspect and copy your health information.
- request an amendment to your medical records should you feel they are incomplete or inaccurate. A written request must include the reason that supports the request.
- find out how your information is used and to whom it is disclosed. You may request an account of medical record disclosures made by ASCST except for disclosures made for routine treatment, payment, and health care operations.

We are required by law to maintain the privacy of your protected health information and if you believe that your rights have been violated, please notify ASCST, or you may file a complaint with the Secretary of the U.S. Department of Health and Human Services. We will not retaliate in any way against a patient for making a complaint.

ASCST reserves the right to change our privacy practices and to make new policies effective for all protected health information that we maintain. If we should do so we will issue an updated notice.