

5230 Willow Creek Drive, Ste 101  
Springdale, AR 72762



900 S. 52nd Street, Ste 103  
Rogers, AR 72758

www.allboardpediatrictherapy.com  
Phone (479) 445-6800 | Fax (479) 445-6816

## NOTICE OF PRIVACY PRACTICES

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

All Aboard Pediatric Therapy (AAPT) is required by law to maintain the privacy of your child's health and education information, to provide you a notice of our legal duties and privacy practices, and to follow the information practices that are described in this notice. We respect your privacy. We understand that your child and family's personal information is very sensitive. For example, your child's personal information includes demographics, treatment plans, documentation of diagnosis, and treatment records. Described as follow are the ways we may use and disclose information that identifies your child.

### HOW WE MAY USE AND DISCLOSE HEALTH INFORMATION

**Treatment:** We will use health information to provide treatment to your child. This includes use and disclosure of health information among AAPT staff and volunteers as it relates to your child's treatment. In addition, with your written consent, we may disclose health information to your child's doctors, nurses, technicians, or other personnel, including other people who are involved in your child's medical care.

**Payment:** With your authorization, we may disclose health information so that we or others may bill and receive payment from you, an insurance company, or a third party for the treatment and services your child received. For example, we may provide your health plan with information including diagnosis, procedures performed, progress, goals or recommended care, so they will pay for your child's treatment.

### OTHER USES AND DISCLOSURES

We may also use or disclose your child's information to meet special reporting requirements, for public health reasons, or for other purposes. Such disclosures permitted by law that do not require your written consent include:

- Family and friends involved in your child's care or payment.
- Disclosures to public health authorities to prevent or control disease.
- Disclosures to public authorities as part of a report of child abuse, neglect or domestic violence.
- Data for health or educational oversight activities, such as audits, investigations or inspections.
- To avert a serious threat to health or safety or to prevent serious harm to an individual.
- To secure emergency medical treatment for your child in the event of an accident or injury.
- Participation in a qualifying research project
- As required by law, such as for law enforcement or in response to a lawful subpoena or court order.
- Coroners or medical examiners, as necessary, to carry out their duties.
- To provide you with information about treatment alternatives or new health-related services that may be of interest to you.
- Appointment reminders.

All other uses and disclosures will be made **ONLY** with your written authorization, which you have the right to revoke in most cases.

## YOUR RIGHTS

You have the following rights regarding health and education information we have about your child:

**Right to Inspect and Copy:** You have a right to inspect and copy health information that may be used to make decisions about your child's care or payment for your child's care. This includes medical and billing records, other than psychotherapy notes. To inspect a copy of this health information, you must make your request in writing to our Executive Director.

**Right to Amend:** If you feel that the health or education information we have is inaccurate or misleading, you may ask us to amend the information. You have the right to request an amendment for as long as the information is kept by or for AAPT. To request an amendment, you must make your request in writing to our Quality Assurance Coordinator. While we accept requests for amendment, we are not required to agree to the amendment.

**Right to an Accounting of Disclosures:** You have the right to request a list of certain disclosures and a record of access regarding your child's health and education information. The list does not include disclosures we made directly to you, disclosures to friends/family members, disclosures you specifically authorized in writing, disclosures to third party payers or disclosures related to our daily business operations. To request an accounting of disclosures, you must make your request in writing to our Executive Director.

**Right to Request Restrictions:** You have the right to request a restriction or limitation on the health information we use or disclose. You also have the right to request a limit on the health information we disclose to someone involved in your child's care or the payment for your child's care, like a family member or friend. To request a restriction, you must make your request in writing to our Executive Director. We are not required to agree to your request. If we agree, we will comply with your request unless the information is needed to provide your child with emergency treatment.

**Right to Request Confidential Communication:** You have the right to request that we communicate with you in a certain way or at a certain location. For example, you can ask that we contact you only by mail or at work. Please contact our Executive Director to request confidential communication. Your request must specify how or where you wish to be contacted. We will accommodate reasonable requests.

## CHANGES TO THIS NOTICE

We reserve the right to change this notice. The new notice will apply to health and education information we already have, as well as any information we receive in the future. We will post a copy of our current notice at our clinic. The notice will contain the effective date on the first page.

## COMPLAINTS

If you believe your privacy rights have been violated, you may file a complaint with us or with the U.S. Department of Education. To file a complaint with AAPT, contact:

Executive Director  
All Aboard Pediatric Therapy  
5230 Willow Creek Dr. Suite 101  
Springdale, AR 72762

All complaints must be made in writing. You will not be penalized for filing a complaint.