# FTC Privacy Policy for Web Site .

# Sanjay Aggarwal MDPA, Lake Jackson, TX 77566. P:(979)297-1007

#### **Privacy Policy Information**

Federal law requires your office to tell visitors on your web site how you collect, use, share, and protect your personal information. Federal law also limits how your practice can use your personal information. Protecting the privacy and security of consumers' personal information is very important.

For More Information: https://www.ftc.gov/reports/privacy-data-security-update-2016

This practice is required to provide our patients with notice of our privacy practices with respect to your protected personal information collected from this website. Please read this notice carefully to understand what we do with the personal information we collect both online and offline.

#### Consent

By using this website, you consent to understanding and accepting the terms listed in this privacy policy. We reserve the right to update, amend, or change this Privacy Policy at any time to conform to new laws and regulations or changes in business standards. This privacy policy does not extend to any third party websites that link to or from our websites and we are not responsible for any of the content on those website. Those websites have their own privacy policies and it is recommended that users read through them before providing any information to the website owner.

#### **Information Security**

Wherever we collect sensitive information (health history), that information is encrypted and transmitted to us in a secure way, such as the Secure Socket Layer (SSL) protocol. All forms have 256 bit encryption to securely transmit information.

We take appropriate security measures to protect against unauthorized access to or unauthorized alteration, disclosure or destruction of data. These include internal reviews of our data collection, storage and processing practices and security measures, as well as physical security measures to guard against unauthorized access to systems where we store personal data.

Our privacy policy does not cover content that is transmitted via email to our office. Email does not have the same encryption and security protocols and should not be used to transmit sensitive information.

#### Log Information

When you use our website, our servers automatically record information that your browser sends whenever you visit a website. These server logs may include information such as your web request, Internet Protocol address, browser type, browser language, the date and time of your request and one or more cookies that may uniquely identify your browser.

Cookies enable us to customize your browsing experience and speed up website load times. You have the ability to accept or decline cookies at any time. If you decline cookies, you do not have access to the benefits of a custom web browsing experience.

#### **Information Sharing**

Your email will not be sold, rented or leased to a third-party.

#### **Social Media Policy**

We are not responsible for any information collected by social networks on which we maintain a social media presence. These include, but are not limited to, Facebook, Google, Twitter, Pinterest, and LinkedIn. Each social network has its own privacy policy and it should be read before creating an account on the network. We are not responsible for any marketing or retargeting performed by a social network after you have visited our pages.

#### **Changes to This Policy**

Please note that this Privacy Policy may change from time to time. While we expect most such changes will be minor, we will post any Policy changes on this page.

Effective January 2018

# **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.

<ul> <li>You have the right to:</li> <li>Get a copy of your paper or electronic medical record</li> <li>Correct your paper or electronic medical record</li> <li>Request confidential communication</li> <li>Ask us to limit the information we share</li> <li>Get a list of those with whom we've shared your information</li> <li>Get a copy of this privacy notice</li> <li>Choose someone to act for you</li> <li>File a complaint if you believe your privacy rights have been violated</li> </ul>	<ul> <li>You have some choices in the way that we use and share information as we:</li> <li>Tell family and friends about your condition</li> <li>Provide disaster relief</li> <li>Include you in a hospital directory</li> <li>Provide mental health care</li> <li>Market our services and sell your information</li> <li>Raise funds</li> </ul>
<ul> <li>Our Uses and Disclosures</li> <li>We may use and share your information as we:</li> <li>Treat you</li> <li>Run our organization</li> <li>Bill for your services</li> </ul>	<ul> <li>Help with public health and safety issues</li> <li>Do research</li> <li>Comply with the law</li> <li>Respond to organ and tissue donation requests</li> <li>Work with a medical examiner or funeral director</li> </ul>

When it comes to your health information, you have certain rights. This section explains your rights and some of our responsibilities to help you.

#### Get an electronic or paper copy of your medical record

• You can ask to see or get an electronic or paper copy of your medical record and other health information we have about you. Ask us how to do this.

• We will provide a copy or a summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee.

#### Ask us to amend your medical record

• You can ask us to amend health information about you that you think is incorrect or incomplete. Ask us how to do this.

• We may say "no" to your request, but we'll tell you why in writing within 60 days.

#### **Request confidential communications**

• You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address.

• We will say "yes" to all reasonable requests.

#### Ask us to limit what we use or share

• You can ask us not to use or share certain health information for treatment, payment, or our operations. We are not required to agree to your request, and we may say "no" if it would affect your care.

• If you pay for a service or health care item out-of-pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer. We will say "yes" unless a law requires us to share that information.

#### Get a list of those with whom we' ve shared information

serious and imminent threat to health or safety.

In these cases we never share your information unless you give us written permission: • Most sharing of psychotherapy notes • Sale of your information • Marketing purposes In the case of fundraising we may contact you for fundraising efforts, but you can tell us not to contact you again.

#### **Our Uses and Disclosures**

We typically use or share your health information in the following ways.

We can use your health information and share it with other professionals who are treating you. We can use and share your health information to run our practice, improve your care, and contact you when necessary.

We can use and share your health information to bill and get payment from health plans or other entities.

Electronic Exchange. Your information may be shared w/ other providers, labs and radiology groups through our EHR system as listed:

None

#### How else can we use or share your health information?

We are allowed or required to share your information in other ways – usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information see: www.hhs.gov/ocr/privacy/ hipaa/understanding/consumers/index.html.

#### Help with public health and safety issues

We can share health information about you for certain situations such as:

- Preventing disease Preventing or reducing a serious threat to anyone's health or safety
- Helping with product recalls Reporting suspected abuse, neglect, or domestic violence

• You can ask for a list (accounting) of the times we've shared your health information for six years prior to the date you ask, who we shared it with, and why.

• We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We'll provide one accounting a year for free but will charge a reasonable, cost-based fee if you ask for another one within 12 months.

#### Get a copy of this privacy notice - You can ask for a paper copy of this notice at any time.

# Choose someone to act for you

• If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information. We will ensure the person has this authority before we take any action.

#### **Your Choices**

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

- In these cases, you have both the right and choice to tell us to:
- Share information with your family, close friends, or others involved in your care
- Share information in a disaster relief situation

If you are not able to tell us your preference we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a

• Reporting adverse reactions to medications • Do research • Comply with the law • Respond to organ and tissue donation requests • Work with a medical examiner or funeral director. We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we' re complying with federal privacy law.

#### We can use or share health information about you:

- For workers' compensation claims For law enforcement purposes or with a law enforcement official
- With health oversight agencies for activities authorized by law
- For special government functions as military, national security, and presidential protective services • Respond to lawsuits and legal actions

# **Our Responsibilities**

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html.

# Changes to the Terms of this Notice

We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, in our office, and on our web site.

# You Have A Right To File A Complaint If You Feel Your Privacy Has Been Violated

 If you feel your Privacy Rights have been violated, please ask our staff for a Privacy Complaint Form. Our Security Officer will review the form and promptly notifiy you of the actions our office will take.

 or You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775,

# Sanjay Aggarwal, M.D., P.A.

HIPAA Compliance Officer: Sanjay Aggarwal, M.D.

Phone: 979-297-1007 This Notice of Privacy Practices is effective March 1, 2020

# **Nondiscrimination Policy**

As a recipient of Federal financial assistance, (SANJAY AGGARWAL MD PA) does not exclude, deny benefits to, or otherwise discriminate against any person on the ground of race, color, national origin, disability, or age (and any other bases that you wish to include, such as sex, sexual orientation, gender identity, religion, creed, etc.) in admission to, participation in, or receipt of the services and benefits under any of its programs and activities, and in staff and employee assignments to patients, whether carried out by (SANJAY AGGARWAL MD PA) directly or through a contractor or any other entity with which (SANJAY AGGARWAL MD PA) arranges to carry out its programs and activities.

This statement is in accordance with the provisions of Title VI of the Civil Rights Act of 1964 (nondiscrimination on the basis of race, color, national origin), Section 504 of the Rehabilitation Act of 1973 (nondiscrimination on the basis of disability), the Age Discrimination Act of 1975 (nondiscrimination on the basis of age), regulations of the U.S. Department of Health and Human Services issued pursuant to these three statutes at Title 45 Code of Federal Regulations Parts 80, 84, and 91, *(and state laws or corporate policies, etc.).* 

Additionally, in accordance with Section 1557 of the Patient Protection and Affordable Care Act of 2010, 42 U.S.C. § 18116, *(SANJAY AGGARWAL MD PA)* does not exclude, deny benefits to, or otherwise discriminate against any person on the ground of sex (including gender identity) in admission to, participation in, or receipt of the services and benefits under any of its health programs and activities, and in staff and employee assignments, whether carried out by *(SANJAY AGGARWAL MD PA)* directly or through a contractor or any other entity with which *(SANJAY AGGARWAL MD PA)* arranges to carry out its programs and activities.

In case of questions, please contact:

Provider Name:

#### SANJAY AGGARWAL MD

Contact Person/Section 504 Coordinator:

#### SANJAY AGGARWAL MD

Telephone number: (979)-297-1007