



Iris Healing Arts
Wellness Rooted in Nature

Statement of Privacy Practices

Dear Valued Client,

This notice describes our office's policy for how medical information about you may be used and disclosed, how you can get access to this information, and how your privacy is being protected.

In order to maintain the level of service that you expect from our office, we may need to share limited personal medical and financial information with your insurance company, with Worker's Compensation (and your employer as well in this instance) , or with other medical practitioners that you authorize.

Safeguards in place at our office include:

- Limited access to facilities where information is stored
- Policies and procedures for handling information
- Requirements for third parties to contractually comply with privacy laws
- All medical files and records (including email, regular mail, telephone, and faxes sent) are kept on permanent file.

Types of information that we gather and use:

In administering your health care, we gather and maintain information that may include non-public personal information:

- About your financial transactions with us (billing transactions)
- From your medical history, treatment notes, all test results, and any letters, faxes, emails or telephone conversations to or from other health care practitioners
- From health care providers, insurance companies, workman's comp and your employer, and other third party administrators (e.g. requests for medical records, claim payment information, etc.)

As our client, you have important rights relating to inspecting and copying your medical information that we maintain, amending or correcting that information, obtaining an accounting of our disclosures or your medical information, requesting that we communicate with you confidentially, requesting that we restrict certain uses and disclosures of your health information, and reporting if you think your rights have been violated.

We value our relationship with you and respect your right to privacy. If you have questions about our privacy guidelines, please call us during regular business hours at 503.913.1310.

I acknowledge that I have reviewed a copy of the Statement of Privacy Practices from Iris Healing Arts, LLC.

Client signature: _____ Date: _____