



Notice of Privacy Practices for Hearing Care Solutions

This notice describes how information about you may be used and disclosed. Please review it carefully.

Introduction

Hearing Care Solutions (HCS) affirms that protecting and maintain the privacy and security of confidential health information is a component of the Hearing Care Solutions values. This is a commitment we make to our members and health plan partners. We strive for exceptional compliance with the law and honor our commitment by establishing a framework that builds trust and confidence in how we use and disclose confidential health information. We support this privacy and security process by providing our company with knowledge, resources, and systems to maintain the highest degree of integrity when handling confidential health information.

How will we use information about you?

HCS may use information about you to provide you with hearing services and instruments. We may disclose information about you to others that need the information to treat you, such as audiologists, hearing instrument specialists, or others involved in your care. We may make your medical information available electronically through a protected exchange to your health plan that requests your information for their treatment and payment purposes. We may also use and disclose information about you to contact you and remind you of upcoming appointments, possible options and alternatives, or tell you about services available to you. We will not disclose your personal information to third parties for marketing purposes.

Authorized Representatives

HCS may disclose information about you to a family member or friend who is involved in your care. HCS asks people calling for you if they have permission to speak on your behalf. We document the person and may contact them back to follow up on a plan of care. If you do not want us to disclose information about you to family members or others, you must notify our Customer Care Team.

Payments

HCS may use and disclose information about you to get paid for the services and instruments we provide to you. For example, your health plan or insurance company may request to see parts of your medical record or benefit usage before they will pay us for your treatment. HCS may also provide information, with your permission, about your order to a finance company to assist you with a finance plan for your instruments.

Operations

HCS may use and disclose information about you, if it is necessary, to improve the quality of care we provide to patients of our health plan operations. We may use non-identifying information about you to conduct quality improvement activities, to obtain audit information, to perform accounting or legal services, or to conduct business management and planning. For example, we may use your information to review our level of care and service, improve our provider network, identify benefit utilization, and to evaluate the performance of our staff in caring for you.

We may use your data to provide and maintain service, to address security and customer support issues, to detect, prevent, or address fraud, security, unlawful, or technical issues, as required by law, to fulfill our contracts, to improve and enhance the services, to provide analysis or valuable information back to our health plans and providers.

Health Oversight

HCS may disclose medical information to a government or oversight agency, such as the state's department of health services, or other federal agencies that oversee Medicare, or licensing agencies who govern audiology and other speech and hearing professionals.

Law

Federal, state, and local laws do not require patient consent to disclose information which is required to be reported. For example, we are required to report potential child abuse and neglect, or elder abuse and neglect. Public policy has determined that these types of needs outweigh the patient's right to privacy. We may also need to report patient problems with instruments to the manufacturer.

As required by law, for example, to comply with a valid subpoena or other legal process; when we believe in good faith that disclosure is necessary to protect our rights, or to protect your safety (or the safety of others), to investigate fraud, or to respond to a government request.

What does this Notice Cover?

This Notice of Privacy Practices applies to the Hearing Care Solutions Corporate Office, all personnel, and all providers practicing within our network.

What are your rights?

Right to Request Information about You

You, or your authorized representative, are entitled to access of your health information. This includes your hearing examination and benefit information. If you request a copy of your information, we may charge for the cost. We will tell you in advance what the cost will be.

Right to Request Restrictions

You have the right to request us not to use or disclose information about you for operational purposes. We are not required to agree to your request, but if we do agree, we will comply with that agreement unless that information is necessary by law. If you want to request a restriction to your medical information, you may contact the Customer Care Team.

Right to Amend Information about You

If you see information you believe is incorrect or incomplete, you may ask us to amend your record. You may submit a request by contacting Customer Care Team.

Right to Request Confidential Communications

You have the right to request us to communicate with you in a way that you feel is more confidential. We will accommodate reasonable requests including alternative addresses or phone numbers. To do this, submit your request in writing to the Customer Care Team.

Changes to this Notice

We may update this privacy policy to reflect changes to our information practices. If we make any changes, we will provide notice on this website, and we may notify you by email (sent to the e-mail address specific to your account), prior to the change becoming effective. We encourage you to periodically review this page for the latest information on our privacy practices. If you continue to use the services after those changes are in effect, you agree to the revised policy.

Do you have a Concern or Complaint?

Please tell us about any problems or concerns you may have with your privacy rights or how HCS uses or discloses information about you. If you have a concern, you may contact the Customer Care Team. You can also contact your health plan directly. We will not penalize you or take any retaliatory action against you in any way for filing a complaint.

Do you have any Questions?

HCS is required by law to provide this notice, and to follow the terms of this notice that is currently in effect. If you have questions about this notice, or questions about how we may disclose information about you, please contact the Customer Care Team.

OUR MISSION IS TO PROVIDE THE HIGHEST QUALITY OF HEARING HEALTHCARE AT THE MOST AFFORDABLE PRICES. HCS SEEKS TO BRING QUALITY, VALUE, SIMPLICITY, AND TRANSPARENCY TO HEARING CARE.



Hearing Care Solutions, Patient Services: (866) 326-8367 PatientServices@HearingCareSolutions.com

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