



Lyudmila Kimyagarova

Director

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NOTICE OF PATIENT PRIVACY PRACTICES

According to the Health Insurance Portability & Accountability Act of 1996 (HIPPA), you have certain rights to privacy regarding your protected health information. This information can and will be used:

- To conduct, plan and direct my treatment and follow-up among the multiple healthcare providers who may be involved in that treatment directly and indirectly.
- To obtain Payment from third-party payers
- To conduct normal healthcare operations such as quality assessments and provider certifications.
- During an audit, in emergencies, or when required by law.

You will be asked for written authorization to use their personal medical information at any time, to request that inaccurate information be corrected, or to request a list of instances when the information has been disclosed for reasons other than treatment, payment or other administrative purposes. You have the right to restrict how the information is used and disclosed for treatment, payment and administrative operations. The requests for restrictions will be considered on a case-by-case basis. You have the right to address concerns and complaints about a potential violation of their health privacy to the US Department of Health and Human Services.

For further questions, you may contact the Compliance Officer,

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