

Notice of Privacy Practices

Effective Date: 9/15/2025

This Notice describes how your medical information may be used and disclosed, and how you can access this information. Please review it carefully.

1. Our Commitment to Your Privacy

Move With Meg LLC is committed to protecting the privacy of your health information. We are required by law (the Health Insurance Portability and Accountability Act, or "HIPAA") to keep your protected health information (PHI) confidential, to provide you with this notice, and to follow its terms.

2. How We May Use and Disclose Your Information

We may use and share your PHI for the following purposes without your written authorization:

- **Treatment:** To provide, coordinate, or manage your healthcare and related services.
- **Payment:** To bill and collect payment for services provided.
- **Healthcare Operations:** For administrative, quality assurance, or business activities that support our practice.

We may also disclose information:

- As required by law or legal process
 - To public health authorities or for health oversight activities
 - To prevent or lessen a serious threat to health or safety
 - To comply with workers' compensation laws
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3. Other Uses and Disclosures

Any use or disclosure not described in this Notice will require your **written authorization**. You may revoke such authorization at any time in writing, except to the extent we have already acted on it.

4. Your Rights Regarding Your Health Information

You have the right to:

- **Access and Copies:** Request to see or obtain a copy of your PHI
 - **Amendments:** Request corrections if you believe your PHI is incorrect or incomplete.
 - **Restrictions:** Request limits on how we use or share your medical information (we may not always be able to agree).
 - **Confidential Communications:** Request that we contact you in a specific way (e.g., at work instead of home).
 - **Accounting of Disclosures:** Request a list of disclosures we have made of your medical records (except for those related to treatment, payment, or operations).
 - **File a complaint:** You have a right to file a complaint if you believe your privacy rights have been violated
 - **Paper Copy:** Request a paper copy of this Notice, even if you received it electronically.
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5. Our Duties

- We are required by law to maintain the privacy and security of your PHI
 - We will notify you promptly if a breach occurs that may have compromised the privacy or security of your PHI.
 - We must follow the terms of this Notice unless you are notified of changes.
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6. Our Uses and Disclosures

We may use and share your information as we:

- Treat you - we can use your information and share it with other professionals involved in your care
- Bill for your services - We can use your information as we will and obtain payment from other entities
- Help with public safety issues - We can use health care information about you for certain situations such as: Preventing disease , Helping with product recalls, Reporting adverse reactions to medications, Reporting suspected abuse, neglect, or domestic violence, Preventing or reducing a serious threat to anyone's health or safety
- Comply with the law- We can use your information 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.
- Address workers' compensation, law enforcement, and other government requests - 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 such as military, national security, and presidential protective services
- Response to legal actions or law suits- we can use your information in response to court, administration order or subpoena
- We must follow the terms of this Notice unless you are notified of changes.

7. Changes to This Notice

We may update this Notice at any time. The revised Notice will apply to all PHI we maintain, past and present. The updated version will be available on our website and in our office.

8. Questions or Complaints

If you have questions or concerns about this Notice, or if you believe your privacy rights have been violated, you may contact us at:

Move With Meg LLC

Email: meg@movewithmegpt.com

Website: [www.movewithmegpt.com]

You may also file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights. Filing a complaint will not affect the care you receive.

For more information see:

www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html
