SOUND HEARING
AUDIOLOGY & SPEECH
50 Hazelwood Drive, Jericho, NY 11753
P: (516) 932-7577 | F: (516) 252-5131

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. PLEASE REVIEW IT CAREFULLY.

Effective Date: January 1st, 2026

Our Commitment to Your Privacy

SOUND HEARING AUDIOLOGY AND SPEECH is required by law to maintain the privacy of your protected health information ("PHI"), to provide you with this notice of our legal duties and privacy practices, and to follow the terms of this notice while it is in effect.

How We May Use and Disclose Your Health Information

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

- Treatment — to provide, coordinate, or manage your audiological care, including sharing information with other providers involved in your care.
- Payment — to bill and collect payment from you, your insurance company, Medicare, Medicaid, or other payors.
- Healthcare Operations — quality assessment, staff training, licensing, and practice management.
- Appointment Reminders and Communications — by phone, mail, email, or text, as you have consented.
- As Required by Law — public health reporting, oversight activities, judicial/administrative proceedings, law enforcement as legally required.

Other uses and disclosures will be made only with your written authorization, which you may revoke at any time in writing.

Your Rights Regarding Your Health Information

- Right to Access your medical and billing records, with limited exceptions.
- Right to Request Amendment if you believe your information is incorrect or incomplete.
- Right to an Accounting of Disclosures we have made of your PHI.
- Right to Request Restrictions on how we use or disclose your PHI.
- Right to Request Confidential Communications in a specific way or location.
- Right to a Paper Copy of this notice at any time.
- Right to Be Notified of a Breach of your unsecured PHI.

Our Responsibilities

- We are required by law to maintain the privacy of your PHI and provide you with this notice.
- We must abide by the terms of this notice currently in effect.
- We reserve the right to revise this notice; updates will be available on request and posted at our office and website.

Complaints

If you believe your privacy rights have been violated, you may file a complaint with our Privacy Officer or with the U.S. Department of Health and Human Services, Office for Civil Rights. You will not be penalized or retaliated against for filing a complaint.

Privacy Officer: Office Manager

Contact: 516-932-7577

Mail: 50 Hazelwood Drive
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