Identity Theft Compliance Program

This notice describes how identity and financial information about you may be used and disclosed and how you can get access to this information.

Please review it carefully.

In compliance with the Federal Trade Commission (FTC) Identity Theft and Red Flag ruling, effective May 1, 2009, the practices of **Albert Speach**, **MD**/**dba**/**Bluegrass Ear**, **Nose & Throat** shall adhere to this Identity Theft Compliance Program that details the practices' processes, procedures and policies in preventing and handling of identity and financial information theft.

1. Proof of Identity

If services are rendered to you and payment in full is not received at the time of service, you will be asked by our staff to provide documentation that will confirm your identity. This form of identification can be an authorized photo ID, driver's license, birth certificate, social security card, etc. This documentation is required even if payment for services will be received from a third party, i.e. insurance company, attorney, employer, etc. A health insurance identification card is *not* considered proof of identity under the FTC ruling. If proof of identity cannot be given, payment in full will be required for all services. If, at a later date, identity can be proven, our practice will comply by submitting any and all requests for payment from the appropriate third party payer and a refund made to the patient when the third party payment is received.

2. Uses of your Identity and Financial information

Your Identity and Financial information will be retained as part of your patient record and used by our staff to confirm that services are rendered to the correct patient and only disclosed, as needed, to the appropriate third party payer in order to obtain payment for your health care services.

3. Your Rights

At any time, you have the right to inspect the records kept by this office in regards to the retention and use of your identity and financial information. You have the right to restrict the use of your identity and financial information on a per service basis, however, if a restriction is requested, payment in full must be made at the time of service and payment from a third party can not be requested. You have the right to receive an accounting of the disclosure of your Identity and Financial information if you feel a breech of security has occurred after May 1, 2009.

4. Security Breeches

If this practice's confidential patient information, including identity and/or financial information, suffers a breech in security, any and all affected parties will be notified in writing as soon as possible so that appropriate steps can be taken by the individual to prevent adverse actions that may jeopardize his/her identity or financial health. The appropriate Legal and Law enforcement agencies will also be notified so that corrective actions can be instituted and the perpetrators apprehended.

5. Complaints

You may complain to us or to the Federal Trade Commission if you believe your identity and financial information has been misused by us. You may file a complaint with us by notifying our Identity and Financial Information contact of your complaint. We will not retaliate against you for filing a complaint.

Contact our Identity and Financial Information contact, <u>Jane Estes, Practice Manager</u> at (859) 277-3725 or <u>bgent@qx.net</u> for further information about the complaint process.

This notice was published and becomes effective on May 1, 2009.