

Moser Speech Therapy Services

Notice of Privacy Practices

Effective Date: January 1, 2026

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN ACCESS THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Our Commitment to Your Privacy

At Moser Speech Therapy Services, we understand the importance of protecting your personal health information. We are required by law to maintain the privacy and security of your protected health information (PHI) and to provide you with this notice of our legal duties and privacy practices.

We will follow the terms of this notice and notify you promptly if a breach occurs that may compromise your information.

How We May Use and Disclose Your Information

We may use and share your health information in the following ways:

For Treatment

We use your information to provide, coordinate, and manage your speech therapy services. This may include communication with other healthcare providers involved in your care.

For Payment

We may use and disclose your information to bill and receive payment from health plans or other entities. This includes sharing information with your insurance provider to determine coverage and process claims.

For Healthcare Operations

We may use your information to run our practice, improve care, and contact you when necessary (such as appointment reminders, scheduling, or follow-ups).

Other Ways We May Use or Share Your Information

We may also use or share your information:

- When required by law
 - For public health and safety purposes
 - To comply with health oversight activities
 - In response to court orders or legal proceedings
 - For law enforcement purposes, when permitted
 - To prevent a serious threat to health or safety
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Uses and Disclosures Requiring Your Written Authorization

We will not use or disclose your information for the following purposes without your written permission:

- Marketing purposes
- Sale of your information
- Sharing psychotherapy notes (if applicable)

You may revoke your authorization at any time in writing.

Your Rights Regarding Your Information

You have the right to:

Access Your Records

You may request to see or receive copies of your medical records.

Request Corrections

You may ask us to correct information you believe is incorrect or incomplete.

Request Confidential Communications

You can ask us to contact you in a specific way (for example, at a different phone number or address).

Request Restrictions

You may request limits on how we use or share your information. While we are not always required to agree, we will consider all requests.

Receive an Accounting of Disclosures

You may request a list of certain disclosures we have made of your information.

Get a Copy of This Notice

You may request a paper or electronic copy of this notice at any time.

File a Complaint

If you believe your privacy rights have been violated, you may file a complaint with us or with the U.S. Department of Health and Human Services. Filing a complaint will not affect your care.

Our Responsibilities

We are required to:

- Maintain the privacy and security of your health information
 - Provide you with this notice of our legal duties and privacy practices
 - Follow the terms of this notice
 - Notify you if a breach of your information occurs
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Changes to This Notice

We reserve the right to change this notice at any time. Any updated notice will be posted in our office and on our website, if applicable, with a new effective date.

Contact Information

If you have questions, concerns, or wish to exercise your rights, please contact:

Moser Speech Therapy Services

10721 Chapman Hwy, Ste 22

Seymour, TN 37865

Phone: 865-579-2293

Fax: 865-579-2295