

NOTICE OF PRIVACY PRACTICES FOR PROTECTED HEALTH INFORMATION (PHI)

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

- **Treatment.** We use your PHI to provide you with medical services and to coordinate and/or manage your care. We may use your PHI to contact you about your care or to contact you about a health-related matter. We may use your PHI to contact you about a health-related matter. We may use your PHI to contact you about a health-related matter.
- **Payment.** We use your PHI to bill you for services and to collect payment. We may use your PHI to contact you about your bill or to contact you about a health-related matter. We may use your PHI to contact you about a health-related matter. We may use your PHI to contact you about a health-related matter.
- **Healthcare Operations.** We use your PHI to improve the quality of our services and to conduct research. We may use your PHI to contact you about your care or to contact you about a health-related matter. We may use your PHI to contact you about a health-related matter. We may use your PHI to contact you about a health-related matter.

OTHER PERMITTED USES AND DISCLOSURES:

- **You.** You may request access to your PHI and request corrections to your PHI.
- **People You Designate.**

In certain situations, you have the right to object before your health information can be used or revealed. This does not apply if you are being treated for certain mental or behavioral problems. If you do not object after you are given the chance to do so, your health information may be used:

- **Family and Friends.** T.
- **Disaster Relief.**

OTHER RIGHTS REGARDING YOUR HEALTH INFORMATION:

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- **Requesting Restrictions.**) We are not required to agree to your request 1) 2) 3)

Note: The above information is provided by the Student Health Center, LSU Student Health Center, 161 La Tourette Drive, Baton Rouge, LA 70803, (225) 578-6271.

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