

# VIP WeightLoss MD.

## HIPAA Form Health Insurance Portability and Accountability Act of 1996 (HIPAA)

HIPAA privacy rule federally protects the privacy of individually identifiable health information held by covered entities, such as, medical clinics. HIPAA gives patients an array of rights in regards to their personal health information, but at the same time permits disclosure of health information needed for patient care. The privacy rule is enforced by the Office for Civil Rights.

**How We Collect Information About You:** VIP WeightLoss MD. centers and its employees collect data through a variety of means including but not necessarily limited to letters, phone calls, emails, voice mails, and from the submission of patient applications that is either required by law, or necessary to process their request for entrance into our weight loss program.

**What We Do Not Do With Your Information:** Information about your financial situation and medical conditions and care that you provide to us in writing, via email, on the phone (including information left on voice mails), contained in or attached to applications, or directly or indirectly given to us, is held in strictest confidence.

We do not give out, exchange, barter, rent, sell, lend, or disseminate any information about applicants or clients who apply for or actually receive our services that is considered patient confidential, is restricted by law, or has been specifically restricted by a patient/client in a signed HIPAA consent form.

**How We Do Use Your Information:** Information is only used as is reasonably necessary to process your health information in order to provide you with health or counseling services. These services may at times require communication between VIP WeightLoss MD. and Dr. G's Weight Loss center and other health care providers, service providers, pharmacies, etc... in order to provide you with the highest quality care.

**Limited Right to Use Non-Identifying Personal Information from Biographies, Letters, Notes, and Other Sources:** Any pictures, stories, letters, biographies, correspondence, or thank you notes sent to us become the exclusive property of VIP WeightLoss MD. and Dr. G's Weight Loss and Wellness Franchise, LLC. We reserve the right to use non-identifying information about our clients (those who receive services or goods from or through us) for fundraising and promotional purposes that are directly related to our mission. Clients will not be compensated for use of this information and no identifying information (photos, addresses, phone numbers, contact information, last names or uniquely identifiable names) will be used without client's express advance permission.

You may specifically request that NO information be used whatsoever for promotional purposes, but you must identify any requested restrictions in writing. We respect your right to privacy and assure you no identifying information or photos that you send to us will ever be publicly used without your direct or indirect consent.

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PATIENT'S SIGNATURE

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DATE

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PATIENT'S PRINTED NAME