

Notice of Privacy Practices

Your information. Your rights. Our responsibilities.

Prepared for clinic review. This readable version does not replace the clinic's current privacy notice. For the current notice or a privacy question, call 240-731-9068.

Yao's Acupuncture

966 Hungerford Drive, Suite 19A, Rockville, MD 20850

Review copy - not yet effective. Privacy contact: Changping Yao.

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.

Your rights

Access your health records

You may ask to inspect or receive an electronic or paper copy of the medical records and other health information we maintain about you. We generally respond within 30 days; if a permitted extension is necessary, we will explain it in writing. Any copy fee must comply with applicable law.

Request a correction

You may request an amendment to information you believe is inaccurate or incomplete. We may deny a request, but will explain the reason in writing, generally within 60 days, and explain your right to submit a statement of disagreement. A correction does not erase the original medical record.

Choose how we contact you

You may request communication by a particular method or at an alternative address. We will accommodate reasonable requests for confidential communications.

Ask for limits on sharing

You may request restrictions on information used or shared for treatment, payment, or health care operations. We are not required to accept every request. If you pay for a service in full out of pocket and ask us not to disclose that service to your health plan for payment or operations, we must honor the restriction unless disclosure is required by law.

Request a disclosure accounting

You may request an accounting of certain disclosures made during the preceding six years. Disclosures for treatment, payment, operations and other legally excluded categories are not included. One accounting in a 12-month period is free; we will explain any permitted fee for additional requests in advance.

Receive a paper notice

You may request a paper copy of this notice even if you previously agreed to receive it electronically.

Have a representative act for you

An authorized personal representative may exercise your rights as permitted by law. We will verify the representative's authority before acting on a request.

Raise a concern without retaliation

You may complain to the clinic or the U.S. Department of Health and Human Services Office for Civil Rights if you believe your privacy rights have been violated. We will not retaliate against you for making a complaint. Contact information appears below.

How information may be used

Treatment

We may use health information to plan and provide your care and share it with other professionals involved in your treatment, subject to applicable confidentiality requirements.

Payment

We may use and disclose information to bill for services and obtain payment where applicable. This statement does not confirm insurance participation or coverage; ask the clinic about your arrangements.

Health care operations

We may use information for practice administration, quality improvement, and communication about your care. Service providers handling protected information on our behalf must meet applicable privacy obligations.

Other legally permitted or required disclosures

Subject to the conditions and limits in law, information may be used or disclosed for public health reporting; reporting suspected abuse or neglect; addressing serious health or safety threats; health oversight; approved research; workers' compensation; certain law enforcement or government functions; organ donation; medical examiners or funeral directors; and legal proceedings. A subpoena does not remove applicable confidentiality protections. We may disclose information when legally required, including to HHS for compliance review.

Your choices and authorization

People involved in your care

You may tell us whether to share relevant information with family, friends, or others involved in your care or payment. If you cannot express a preference, we may use professional judgment as permitted by law, including in emergencies or disaster relief.

Uses requiring written authorization

Uses not permitted by law or described in this notice require your written authorization. This includes marketing and sale of protected health information, and most uses or disclosures of psychotherapy notes, where applicable and subject to legal exceptions. You may revoke an authorization in writing, except to the extent we have already relied on it.

Fundraising communications, if applicable

If the clinic sends fundraising communications, you may opt out. If records protected by 42 CFR Part 2 would be used for fundraising, you must first receive a clear notice and a choice about receiving those communications.

Additional confidentiality protections

Substance use disorder records

If we hold substance use disorder records protected by 42 CFR Part 2, those records cannot be used or disclosed in civil, criminal, administrative, or legislative investigations or proceedings against you without your written consent or a court order and a subpoena, as required by that law. The protections apply to qualifying records; this notice does not represent that the clinic is a Part 2 treatment program.

Maryland and other applicable laws

Maryland law requires medical records to be kept confidential and disclosed only as permitted by law. Where a more protective law applies, it limits the general permissions described above. Mental health and certain other records can have additional restrictions.

Our responsibilities

Protecting your information

We are required to protect the privacy of protected health information, provide this notice of our legal duties and privacy practices, and follow the notice currently in effect. We will notify affected individuals following a breach of unsecured protected health information as required by law.

Changes to this notice

We reserve the right to change this notice and apply revised terms to information we already hold as well as information received later, as permitted by law. An updated notice will show its effective date and be available at the clinic, on this website, and upon request.

Questions, requests and complaints

Contact the clinic

For help with a records request, a privacy question, a complaint, or a paper copy, contact Changping Yao, the clinic's privacy contact, at 240-731-9068 or write to Yao's Acupuncture, 966 Hungerford Drive, Suite 19A, Rockville, MD 20850.

Contact HHS

You may also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights. The official HHS complaint page below explains the process. You do not need the clinic's permission to complain.

Official resources

[HHS health care provider notice template \(February 2026\)](#)

[HHS: Filing a privacy complaint](#)

[Maryland medical-record confidentiality: Health-General 4-302](#)

[Maryland medical-record access: Health-General 4-304](#)

This notice addresses health records. Third-party services you choose to use, such as YouTube, have separate privacy policies.