



NOTICE OF PRIVACY PRACTICES

Rev. Date: 09/04/2013

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

Our Pledge Regarding Your Health Information

We understand that information about you and your health is confidential. We are committed to protecting the privacy of this information. Each time you visit Peak Health Family Medicine (PHFM), we create a record of the care and services you receive. This information may identify you and relate to your past, present or future physical or mental health condition and related health care services and is called Protected Health Information (PHI). We need this record to provide you with quality care and to comply with certain legal requirements. This Notice of Privacy Practices (NPP) applies to all of the records of your care generated by PHFM, whether made by health care personnel or your medical provider. This notice will tell you about the ways in which we may use and disclose health information about you, as well as certain obligations we have regarding the use and disclosure of health information. It also will describe your rights regarding your health information.

Our Responsibilities

Our primary responsibility is to safeguard your personal health information. We must give you this notice of our privacy practices, and follow the terms of the notice currently in effect.

Changes to this notice

We reserve the right to change the terms of our NPP at any time. We reserve the right to make the revised or changed notice effective for health information we already have about you as well as any information we receive in the future. We will provide you with a copy of the revised NPP by posting a copy on our website, sending a copy to you in the mail upon request or providing one to you at your next appointment.

How we may use and disclose health care information about you:

The following categories describe different ways that we use your health information within PHFM and disclose your health information to persons and entities outside of PHFM. We have not listed every use or disclosure within the categories below, but all permitted uses and disclosures will fall within one of the following categories. In addition, there are some uses and disclosures that will require your specific authorization.

For Care or Treatment: Your PHI may be used and disclosed to those who are involved in your care for the purpose of providing, coordinating or managing your health care and any related services. We may disclose PHI about you to doctors, nurses, technicians, medical students, interns, other allied health personnel, and other non-PHFM care providers who are involved in



taking care of your medical or pastoral needs during your visit with us. Your authorization is required to disclose PHI to any other care provider not currently involved in your care.

Example: *If another physician referred you to us, we may contact that physician to discuss your care. Likewise, if we refer you to another physician, we may contact that physician to discuss your care or they may contact us.*

For Payment: Your PHI may be used and disclosed to any parties that are involved in payment for your care or treatment. This may include the disclosure of health information to obtain prior authorization for treatment and procedures from your insurance plan. If you pay for your care or treatment completely out of pocket with no use of any insurance, you may restrict the disclosure of your PHI for payment. **Example:** *Your payer may require copies of your PHI during the course of a medical record request, chart audit or review.*

For Health Care/Business Operations: Uses and disclosures of health information are necessary to operate our health care facility and to make sure all of our patients receive quality care. We may use and disclose relevant PHI about you for health care operations. Examples include quality assurance activities, post-discharge telephone calls to follow-up on your health status, medical staff credentialing, administrative activities including Scripps Health financial and business planning and development, customer service activities including patient satisfaction surveys, investigation of complaints and certain marketing activities such as health education options for treatment and services. We may also disclose PHI in the course of providing you with a reminder for treatment or medical care at our healthcare facility. These appointment reminders may be initiated by an automated voice message system, text messaging or by leaving messages on your phone or at your home about questions you asked or test results. **Example:** *We may share your PHI with third parties that perform various business activities (e.g., Council on Accreditation or other regulatory or licensing bodies) provided we have a written contract with the business that requires it to safeguard the privacy of your PHI.*

Future Communications: We may use your health information to mail you information on health care programs and health care choices.

Legal Requirements: We will share health information about you when required to do so by federal or state law or by court order.

To Avoid Harm: We may use or share your health information to prevent serious threat to your health and safety or the health and safety of others such as the mandatory reporting of child abuse or neglect. If information is disclosed to prevent or lessen a serious threat it will be disclosed to a person or persons reasonably able to prevent or lessen the threat, including the target of the threat.



Research: Under certain circumstances, we may share your health information for research purposes. All research projects must be approved, and the project must keep your information confidential.

Public Health: We may share your health information with public health agencies to prevent or control the spread of diseases.

Health Oversight Activities: We may share your health information to a health oversight agency for activities authorized by law. These activities may include, for example, audits, investigations, and inspections.

Lawsuits and Disputes: We may share your health information in response to a valid judicial or administrative order.

Coroners, Medical Examiners and Funeral Directors: Consistent with applicable law, we may share your health information to a coroner, medical examiner, or funeral director, so that they may carry out their duties. Your health information may also be shared to ensure organ and tissue donation.

Workers Compensation: We may share your health information with programs that give benefits for work-related injuries or illness.

National Security and Intelligence Activities: We may share your health information to authorized federal officials for activities related to national security and special investigations.

Inmates: If you are an inmate of a correctional institution or under the custody of a law enforcement official, we may share your health information to the correctional institution or law enforcement official for the purposes of health care or safety.

School Immunizations: We may send proof of immunization to a school without written consent from you (or your parents) if requested by a school. However, we do still need to get verbal permission.

Verbal Permission: We may use or disclose your information to family members or those that are directly involved in your receipt of services with your verbal permission.

Other uses or sharing of your health information will be made only with your written authorization as required by federal, state or local law.

Your Health Care Information Rights



You have the following rights regarding PHI we maintain about you. To exercise any of these rights, please submit your request in writing to our Office Manager:

Right of Access to Inspect and Copy: You have the right, which may be restricted only in exceptional circumstances or with documents released to us, to inspect and copy PHI that may be used to make decisions about service provided. You may request an electronic copy of your PHI and PHFM is required to get that electronic copy to you within 30 days of your request.

Right to Amend: If you feel that the PHI we have about you is incorrect or incomplete, you may ask us to amend the information although we are not required to agree to the amendment.

Right to an Accounting of Disclosures: You have the right to request an accounting of certain of the disclosures that we make of your PHI. We may charge you a reasonable fee if you request more than one accounting in any 12-month period.

Right to Request Restrictions: You have the right to request a restriction or limitation on the use or disclosure of your PHI for services, payment, or business operations. We are not required to agree to your request.

Right to Request Confidential Communication: You have the right to request that we communicate with you about PHI matters in a specific manner (e.g. telephone, email, postal mail, etc.)

Right to a Copy of this Notice: You have the right to a copy of this notice.

Website Privacy

Any personal information you provide us with via our website, including your e-mail address, will never be sold or rented to any third party without your express permission. If you provide us with any personal or contact information in order to receive anything from us, we may collect and store that personal data. We do not automatically collect your personal e-mail address simply because you visit our site. In some instances, we may partner with a third party to provide services such as newsletters, surveys to improve our services, health or company updates, and in such case, we may need to provide your contact information to said third parties. This information, however, will only be provided to these third-party partners specifically for these communications, and the third party will not use your information for any other reason. While we may track the volume of visitors on specific pages of our website and download information from specific pages, these numbers are only used in aggregate and without any personal information. This demographic information may be shared with our partners, but it is not linked to any personal information that can identify you or any visitor to our site.



Our site may contain links to other outside websites. We cannot take responsibility for the privacy policies or practices of these sites and we encourage you to check the privacy practices of all internet sites you visit. While we make every effort to ensure that all the information provided on our website is correct and accurate, we make no warranty, express or implied, as to the accuracy, completeness or timeliness, of the information available on our site. We are not liable to anyone for any loss, claim or damages caused in whole or in part, by any of the information provided on our site. By using our website, you consent to the collection and use of personal information as detailed herein. Any changes to this Privacy Policy will be made public on this site so you will know what information we collect and how we use it.

Breaches

You will be notified immediately if we receive information that there has been a breach involving your PHI.

For more information or to report a problem:

If you have questions about your privacy rights, would like additional information about something in this notice, or would like to file a complaint because you believe your privacy rights have been violated, you may contact our office manager at: 303-973-3529.