



Notice of Privacy Practices

Effective Date: December 20, 2017

This Notice of Privacy Practices describes how we may use and disclose your protected health information to carry out treatment, payment or health care operations and for other purposes that are permitted or required by law. It also describes your rights to access and control your protected health information. "Protected health information" is information about you, including demographic information, that may identify you and that relates to your past, present or future physical or mental health or condition and related health care services.

1. Uses and Disclosures of Protected Health Information Uses and Disclosures of Protected Health Information Based Upon Your Written Consent.

You will be asked by the physical therapist to sign a consent form. Once you have signed this form, you have consented to the use and disclosure of your protected health information for treatment, payment and health care operations. Your protected health information may be used and disclosed by your physical therapist for the following reasons.

- **Treatment/Payment:** to coordinate and manage your health care with a third party that has already obtained your permission to have access to your protected health information. This may include certain activities that the third party may undertake before it approves or pays for the health care services we recommend for you such as; making a determination of eligibility or coverage for insurance benefits, reviewing services provided to you for medical necessity, and undertaking utilization review activities.
- **Healthcare Operation:** These activities include, but are not limited to, quality assessment activities, employee review activities, training of physical therapists, physical therapy assistants, physical therapy aides, physical therapy students, licensing and conducting or arranging for other business activities.

We may use or disclose your protected health information, to contact you to remind you of your appointment.

We will share your protected health information with third party "business associates" that perform various activities (i.e., billing, transcription services) for the practice.

2. Other uses and Disclosures of Protected Health Information that Require your Written Authorization

Other uses and disclosures of your protected health information will be made only with your written authorization, unless otherwise permitted or required by law as described below. You may revoke this authorization, at any time, in writing. You may not be present or able to agree or object to the use or disclosure of the protected health information. In this case, only the protected health information that is relevant to your health care will be disclosed. Some examples are stated below.



- **Others Involved in Your Healthcare:** Unless you object, we may use or disclose protected health information to notify or assist in notifying a family member, personal representative or any other person that is responsible for your care.
- **Emergencies:** If emergency care is required for your safety, your physical therapist shall try to obtain your consent as soon as reasonably practicable after the delivery of treatment. Your physician and/or 911 will be notified immediately. We may use or disclose your protected health information to an authorized public or private entity to assist in disaster relief efforts and to coordinate uses and disclosures to family or other individuals involved in your care.
- **Public Health:** We may disclose your protected health information for public health activities and purposes to a public health authority that is permitted by law to collect or receive the information. The disclosure will be made for the purpose of controlling disease, injury or disability.
- **Health Oversight:** We may disclose protected health information to a health oversight agency for activities authorized by law, such as audits, investigations, and inspections. Oversight agencies seeking this information include government agencies that oversee the health care system, government benefit programs, other government regulatory programs and civil rights laws.
- **Abuse or Neglect:** We may disclose your protected health information to a public health authority that is authorized by law to receive reports of child or adult abuse or neglect. In this case, the disclosure will be made consistent with the requirements of applicable federal and state laws.
- **Legal Proceedings:** We may disclose protected health information in the course of any judicial or administrative proceeding, in response to an order of a court or administrative tribunal (to the extent such disclosure is expressly authorized). In response to a subpoena, discovery request or other lawful process.

Law Enforcement: We may also disclose protected health information, so long as applicable legal requirements are met, for law enforcement purposes. Criminal Activity: consistent with applicable federal and state laws, we may disclose your protected health information, if we believe that the use or disclosure is necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public.

Required Uses and Disclosures: Under the law, we must make disclosures to you and when required by the Secretary of the department of Health and Human Services to investigate or determine our compliance with the requirements of Section 164.500 et. Seq.

3. Your Rights

You have the right to ask us not to use or disclose any part of your protected health information for the purposes of treatment, payment or healthcare operation. You may also request that any part of your protected health information not be disclosed to family members or friends who may be involved in your care or for notification purposes as described in this Notice of Privacy Practices. Your request must state the specific restriction requested and to whom you want the restriction to apply. Your physical therapist is not required to agree to a restriction that you may request. If the physical therapist believes it is in your best interest to permit use and disclosure of your protected health information, your protected health information will not be restricted. You have the right to



request to receive confidential communications from us by alternative means or at an alternative location. We will accommodate reasonable requests. We may also condition this accommodation by asking you for information as to how payment will be handled or specification of an alternative address or other method of contact. No explanation is required for this request. Please make this request in writing. You have the right to request an amendment of protected health information about you in a designated record set for as long as we maintain this information. In certain cases, we may deny your request for an amendment. If we deny your request for amendment, you have the right to file a statement of disagreement with us and we may prepare a rebuttal to your statement and will provide you with a copy of any such rebuttal. You have the right to receive an accounting of certain disclosures we have made, if any, of your protected health information. This right applies to disclosures for purposes other than treatment, payment or healthcare operations as described in this Notice of Privacy Practices. You have the right to receive specific information regarding these disclosures that occurred after April 14, 2003. You may request a shorter time frame. The right to receive this information is subject to certain exceptions, restrictions and limitations. You have the right to obtain a paper copy of this notice from us, upon request.

4. Complaints: You may complain to us or to the Secretary of Health and Human Services if you believe your privacy rights have been violated by us. You may file a complaint with us by notifying our privacy contact of your complaint. We will not retaliate against you for filing a complaint. You may contact Heather Cullen at 360-441-6053 for further information about the complaint process. This notice was published and becomes effective on December 20, 2017.