

**NOTICE OF PRIVACY POLICIES FOR
MID-ATLANTIC G. I. CONSULTANTS, P.A.
(THIS PRIVACY POLICY IS FOR YOUR INFORMATION ONLY, NO NEED
TO FAX/SEND BACK TO US)**

**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.**

Introduction

This Privacy Notice is being provided to you as a requirement of a federal law, the Health Insurance Portability and Accountability Act (HIPAA). We are committed to treating and using protected health information about you responsibly. This Notice describes the personal information we collect, and how and when we use or disclose that information. It also describes your rights as they relate to your protected health information. This Notice is effective April 14, 2003, and applies to all protected health information as defined by federal regulations.

Understanding Your Health Record/Information

Each time you visit our practice, a record of your visit is made. Typically, this record contains your symptoms, examination, test results, diagnoses, treatment, and a plan for future care or treatment. This information, often referred to as your health or medical record, serves as a:

- Basis for planning your care and treatment,
- Means of communication among the many health professionals who contribute to your care,
- Legal document describing the care you received,
- Means by which you or a third-party payer can verify that services billed were actually provided,
- A tool in educating health professionals,
- A source of data for medical research,
- A source of information for public health officials charged with improving the health of this state and the nation,
- A source of data for our planning and marketing,
- A tool with which we can assess and continually work to improve the care we render and the outcomes we achieve.

Understanding what is in your record and how your health information is used helps you to: ensure its accuracy, better understand who, what, when, where, and why others may access your health information, and make more informed decisions when authorizing disclosure to others.

Your Health Information Rights

Although your health record is the physical property of our practice, the information belongs to you. You have the right to:

- Obtain a paper copy of this Notice of information practices upon request,
- Inspect and copy your health record,
- Amend your health record,
- Obtain a report of disclosures of your health information,
- Request communications of your health information by alternative means or at alternative locations,
- Request a restriction on certain uses and disclosures of your information, and
- Revoke your authorization to use or disclose health information except to the extent that action has already been taken.

Our Responsibilities

We are required to:

- Maintain the privacy of your health information,
- Provide you with this Notice which describes our legal duties and privacy practices with respect to information we collect about you,
- Abide by the terms of this Notice,
- Notify you if we are unable to agree to a requested restriction, and
- Accommodate reasonable requests you may have to communicate health information by alternative means or at alternative locations.

We reserve the right to revise this Notice and to make the new provisions effective for all protected health information we maintain. Should this Notice be revised, we will post a copy of the Notice and will make it available to you when you arrive for services.

We will not use or disclose your health information without your authorization, except as described in this Notice. We will also discontinue to use or disclose your health information after we have received a written revocation of the authorization.

For More information or to Report a Problem

If you have questions and would like additional information, you may contact our Privacy Officer by contacting our office.

If you believe your privacy rights have been violated, you can file a complaint with our Privacy Officer or with the Office for Civil Rights. There will be no retaliation for filing a complaint with either the Privacy Officer or the Office for Civil Rights.

Office for Civil Rights
U.S. Department of Health and Human Services
200 Independence Avenue, SW.
Room 509F, HHH Building
Washington, D.C. 20201

How we may Use and Disclose Medical Information About You?

We may disclose information about you in regards to your 1. Treatment, 2. Payment, and 3. HealthCare Operations.

1. TREATMENT.

We may use medical information about you to provide you with medical treatment and services. We may disclose medical information about you to doctors, nurses, technicians, or other medical personnel who are involved in taking care of you.

For example: Information obtained by a nurse, physician, or other member of your health care team will be recorded in your record and used to determine the course of treatment that should work best for you. Your physician will document in your record his or her expectations of the members of your health care team. Members of your health care team will then record the actions they took and their observations. In that way, the physician will know how you are responding to treatment.

2. PAYMENT.

We may use and disclose medical information about you so that the treatment and services you receive may be billed to and payment may be collected from you, an insurance company, or a third party.

For example: A bill may be sent to you or your insurance company. The bill may include information that identifies you, as well as your diagnosis, procedures, and supplies used.

3 HEALTHCARE OPERATIONS.

We may use and disclose medical information about you in our regular course of business.

For example: Members of the medical staff, the risk or quality improvement manager, or members of the quality improvement team may use information in your health record to assess the care and outcomes in your case and others like it. This information will then be used in an effort to continually improve the quality and effectiveness of the healthcare and service we provide.

Business Associates: Some of the services we provide are through contacts with business associates. Examples include services in the laboratory, radiology, emergency room, hospital, etc. When these services are contracted, we may disclose your health information to our business associate so that they can perform the job we've asked them to do and bill you or your third-party payer for services rendered. To protect your health information, we require the business associate to appropriately safeguard your information.

Communication with family: Health professionals, using their best judgment, may disclose to a family member, other relative, close personal friend or any other person your identity, health information relevant to that person's involvement in your care or payment related to your care.

Notification: We may use or disclose information to notify or assist in notifying a family member, personal representative, or another person responsible for your care, your location, and general condition.

Answering Machine: We may disclose health information to you at the phone number you have provided to us. Examples: appointment reminders, answering your questions, medication changes, lab results, and as a follow up to procedures, etc.

Emergency: We may use and disclose medical information about you when necessary to prevent a serious threat to your health and safety or the health and safety of the public or another person. We would only disclose that information to help prevent the threat.

Treatment Alternatives: We may contact you to provide information about treatment alternatives or other health-related benefits and services that may be of interest to you.

To Report Suspected Abuse, Neglect or Domestic Violence:

We may notify government authorities if we believe that you are a victim of abuse, neglect, or domestic violence. We will make this disclosure only when specifically required or authorized by law or when the patient agrees to the disclosure.

Workers compensation: We may disclose health information to the extent authorized by and to the extent necessary to comply with laws relating to workers compensation or other similar programs established by law.

Research: With your authorization, we may disclose information to researchers when their research has been approved by an institutional review board that has reviewed the research proposal and established protocols to ensure the privacy of your health information.

Food & Drug Administration: We may disclose to the FDA health information relative to adverse events with respect to food, supplements, product and product defects, or post marketing surveillance information to enable product recalls, repairs, or replacement.

Public health: As required by law, we may disclose your health information to public health or legal authorities charged with preventing or controlling disease, injury, or disability.

Health Oversight and Legal: We may disclose health information for law enforcement purposes as required by law or in response to a court or administrative order. Federal law makes provisions for your health information to be released to an appropriate health oversight agency, public health authority or attorney.

Funeral directors: We may disclose health information to funeral directors consistent with applicable law to carry out their duties.

Organ procurement organizations: Consistent with applicable law, we may disclose health information to organ procurement organizations or other entities engaged in the procurement, banking, or transplantation of organs for the purpose of tissue donation and transplant.