

Natura Medica



THE CENTER FOR NATURAL MEDICINE

NOTICE OF PRIVACY PRACTICES

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

THE PRIVACY OF YOUR HEALTH INFORMATION IS IMPORTANT TO US.

We live in a fast paced world with rapidly changing technologies and the practice of medicine is much more complex than it used to be. We would like to take this opportunity to share with you the responsibility we feel toward you and the protection of the private information you have entrusted to us.

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 requires us to provide this notice to you. We are required to follow the terms of this Notice of Privacy Practices. We may, however, change the terms of our notice at any time. We will be happy to provide you with a copy of the Notice of Privacy Practices upon request.

USES AND DISCLOSURES OF INFORMATION

We may use and disclose protected health information (PHI) for treatment, payment, and health care operations. For example: **TREATMENT:** We will create and maintain a medical record in which we document your health issues and the treatment rendered. We may provide a copy of your medical records to another health care provider that is involved in your treatment or receive and use laboratory or other test results in our effort to provide you with quality care. We may also discuss your PHI with a family member, friend or other person involved in your care.

PAYMENT: We may share your PHI with those providing billing services for us in order to obtain appropriate payment. For example, we may provide a copy of your visit record, when requested by your insurance company, to assist them in making a proper determination for payment.

HEALTHCARE OPERATIONS: In order to provide efficient and quality care, we may periodically use or disclose your PHI to auditors or consultants as they assist us in evaluation and improving our services. We may call you with an appointment reminder and leave this information on your answering machine, or send you an email. We may use or disclose your PHI to our business associate who perform some of the necessary functions for operating this clinic. We shall endeavor, at all times when business associate are used, to advise them of their continued contractual obligation to maintain the privacy of your medical records.

ELECTRONIC HEALTH INFORMATION EXCHANGE: This office maintains your medical information in electronic format and shares your information for treatment, payment, and health care operations. This office also discloses your electronic medical information over exchanges accessed by third parties. The exchange is required to comply with certain privacy and security requirements. We will disclose your electronic medical information for the purpose of treatment, payment, or health care operations.

PUBLIC HEALTH RISKS: We may disclose medical information about you for public health activities, generally including to: 1. prevent or control disease, injury or disability; 2. report child abuse or neglect; 3. report reactions to medications; 4. notify a person who may have been exposed to a disease or may be at risk for contracting or spreading a disease or condition; 5. notify the appropriate authority if we believe a patient has been the victim of abuse, neglect, or domestic violence.

You may ask us to restrict further use and disclosure of your PHI for treatment, payment, or health care operations (with the exception of uses or disclosures required by law). While we are not required to agree to such a request, if we believe the request is reasonable and agree to the restriction, we would be bound by the restriction.

INDIVIDUAL RIGHTS:

Your rights regarding your health information:

1. **Confidential Communications:** you can request that our practice communicate with you about your health and related issues in a particular manner or at a certain location. For instance, you may ask that we contact you at home, rather than work. We will accommodate reasonable requests.