

Institute of Complementary Medicine

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Notice of Privacy Practices

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.*

Understanding your Health Information

Each time you visit your healthcare provider, a record of your visit is made. Typically, this record contains a description of your symptoms, physical examination, summary of any tests performed, diagnosis, treatment and a plan for future care. 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 or medical 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

Understanding of what is in your record and how your health information is used to help you to:

- ensure it's accuracy;
- best understand who, what, when, where, and why others may access your health information;
- and make well informed decisions when authorizing disclosure to others

Your Health Information Rights

Although your health information is the physical property of your healthcare provider, the information belongs to you. You have the right to:

- Request a restriction on certain uses and disclosures of your information
- Obtain a paper copy of the "Notice of Privacy Practices" upon request
- Inspect and copy your health records
- Request an amendment of your health record
- Obtain an accounting of disclosures of your health information
- Request communications of your health information by alternative means or at alternative locations
- Revoke your authorization to use or disclose health information except to the extent that action has already been taken

Our Responsibilities

The physicians and staff at this office are required to:

- Maintain the privacy of your health information
- Provide you with a notice as to our legal duties and privacy practices with respect to information we collect and maintain about you
- Abide by the terms of this notice
- Notify you if we are unable to agree to a request restriction
- Accommodate reasonable requests you may have to communicate health information by alternative means or to alternative locations

How We Use your Health Information

- We will use your health information for TREATMENT
Example: Information obtained by a nurse, physician or other member of your healthcare 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.

- We will use your health information for PAYMENT
Example: A bill may be sent to you or a third-party payer. The information on or accompanying the bill may include information that identifies you, as well as your diagnosis, procedures and supplies used.
- We will use your health information for HEALTH CARE OPERATIONS
Example: Members of the medical staff 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 health care and services we provide.

Other Ways That We May Use your Health Information

- **Business Associates:** There are some services provided in our organization through contracts with Business Associates, including: diagnostic services and laboratory tests. When these services are contracted, we may disclose your health information to our Business Associates so that they can perform the job we have asked them to do and bill you or your third-party payer for services rendered. To protect your health information, however, we require the business associates to appropriately safeguard your information.
- **Marketing:** We may contact you to provide appointment reminders or information about treatment alternatives or other health-related benefits and services that may be of interest to you.
- **Worker's Compensation:** We may disclose health information to the extent authorized by and to the extent necessary to comply with laws relating to worker's compensation or other similar programs established by law.
- **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.
- **Law Enforcement:** We may disclose health information for law enforcement purposes as required by law or in response to a valid subpoena.
- **Federal law makes provision for your health information to be released to an appropriate health oversight agency, public health authority or attorney, provided that a work force member or business associate believes in good faith that we have engaged in unlawful conduct or have otherwise violated professional or clinical standards and are potentially endangering one or more patients, workers or the public.**

We reserve the right to change our practices and to make the new provisions effective for all protected health information we maintain. Should our information practices change, we will mail a revised notice to the address you have supplied us.

We will not use or disclose your health information without your authorization, except as described in this notice.

To Report a Problem

If you believe your privacy rights have been violated, you can file a complaint. We will investigate all complaints and there will be no retaliation for such filing. You may also file a written complaint with the U.S. Department of Health and Human Services – Office of Civil Rights (OCR).