

HIPAA Privacy Notice Required Under Federal Law

Effective April 14, 2003

This notice describes how personal or medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

Cal Arundel Family Medicine, including Dr. Wisniewski and Staff, recognize the importance of keeping your health information secure and confidential. Under applicable law, we are providing this notice and will make sure that your personal information is used and disclosed in the manner it describes. However, we reserve the right to amend this notice and any amendment will be effective for all of the information that we already have about you as well as any information that we receive or create in the future.

Under various laws, different requirements apply to types of information that we collect, use and disclose. We use the term "Health Information" to mean individually identifiable information regarding your health care. We use the term "Personal Information" to mean both health information and any other non-public identifiable information that we obtain in providing the health care to you.

What Types Of Personal Information Do We Collect?

In providing health care to you, we may obtain a registration form, family history questionnaire, and other information in writing by telephone or electronically from you, your employer or other health care providers. This information might come in the form such as name, address, phone number, social security numbers, date of birth, marital status, and other demographic and dependent information.

How Do We Protect The Confidentiality Of Your Personal Information?

We restrict access to personal information about you only to those employees who need to know that information to provide medical service to you. We maintain physical, electronic and procedural safeguards to guard your personal information. Our staff is trained to protect the privacy and security of your personal information.

We may share your personal information without your authorization and in accordance with law with certain affiliated or non-affiliated entities in order for us to conduct our health care operations. When we share such information, we enter into confidentiality agreements with these entities that prohibit them from disclosing or using the information other than to carry out the purposes of the disclosure, except as permitted by law.

Use And Disclosures Of Personal Information

The law recognizes that in administering your health care, we may use and disclose your personal information for all the purposes the law categorizes as "Treatment," "Payment," and "Health Care

Operations." The following are some examples of the uses and disclosures, however, not all use or disclosure may fall into any of these categories listed.

- Treatment - We may use and disclose personal information to other health care providers, I.E., specialists who are providing health care to you.
- Payment - We may use and disclose your personal information to determine eligibility for coverage, review medical necessity, and preauthorization for a medical procedure.
- Other Permitted or Required Uses or Disclosures - We may use or disclose personal information in these circumstances: legal proceedings to comply with a court order or other lawful process.
- Other Situations - As detailed in the federal privacy regulations, we may disclose personal information in certain public interest situations, such as to protect victims of abuse or neglect, avert a serious threat to health or safety, to track diseases or medical devices, for workers compensation.

Other Uses

We will obtain your written authorization for uses and disclosures of your health information that is not identified by this notice. We do not destroy health information when you leave our care. It may be necessary to use or disclose, for many of the purposes described above, even after you leave our practice. However, the policies and procedures that protect that information against inappropriate use or disclosure apply regardless of your status.

Rights Established By Law

The following rights regarding your health information are established by law but must be exercised by notifying us.

- Inspect And Copy Health Information - You have the right to inspect and copy health information about you, except for psychotherapy notes or information compiled for use in a civil, criminal or administrative action. (Amendment)

Restrictions

You may request a restriction on our use or disclosure of your personal information. However, we are not required to agree to your restriction.

Confidential Communications

Under certain circumstances, you may request that we tell you about your health information in a certain way or at a certain location. For example, you may ask that we contact you only at work or home. We will accommodate all reasonable requests as determined by Dr. Wisniewski.

Paper Copy Of Notice

You are entitled to receive a paper copy of your notice of privacy practices. We will have you sign that you are in receipt of this notice and scan it into your electronic record. You may ask for a copy at any time.

Complaints

If you believe that we have violated the terms of this notice, you may file a complaint with us or the secretary of the Department of Health and Human Services. You will not be penalized for filing a complaint.

To file a complaint, write to:

The U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, D.C. 20201

Or Call 1-877-696-6775