

NOTICE OF PRIVACY PRACTICES As Required by the Privacy Regulations Created as a Result of the Health Insurance Portability and Accountability Act of 1996 (HIPAA)

PLEASE REVIEW THIS NOTICE CAREFULLY.

Introduction:

THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOUR CHILD (AS A PATIENT OF OUR PRACTICE) MAY BE USED AND DISCLOSED, AND HOW YOU CAN GET ACCESS TO YOUR CHILD'S INDIVIDUALLY IDENTIFIABLE HEALTH INFORMATION.

In this document, when "you, your, you're, you've, etc." is written, your child (the patient) is being referred to.

Protected health information refers to your child's medical record, or chart, that contains all records we have pertaining to your child.

Protected health information will also be written as "PHI or health information"

Examples of Disclosures for Treatment, Payment, and Health Operations

1. We will use your health information for treatment

For example: Information obtained by a nurse, physician, or other staff member at Professional Park Pediatrics will be recorded in your file as part of your Protected Health Information (PHI). We will record the actions we took, and our observations during your appointments in our office. This way, your physician will know how you are responding to treatment.

We will also provide a subsequent health care provider (should it be required) with a copy of your PHI to assist him/her with any further treatment that is necessary.

2. We will use your health information for payment

For 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.

3. We will use your health information for regular health operations

For example: Members of our 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 healthcare and services we provide.

4. Business associates

There are some services provided in our organization through contacts with business associates. Examples include physician services in the hospital, lab, radiology, or other specialist offices. 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, however, we require the business associate to appropriately safeguard your information.

5. 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.

6. Communication with family

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

For example, if someone accompanies you to an appointment, and is in the room with you and the physician, the physician will assume that this person is authorized to hear any counseling and treatment provided in the room and during the visit.

7. Deceased patients

We may disclose PHI to medical examiners to assist in identification and examination of a patient. Additionally, we may disclose PHI to funeral directors consistent with applicable law to carry out their duties.

9. 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.

10. Food and Drug Administration (FDA)

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.

11. Public health

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

For example, if you are diagnosed with a communicable disease, we are required by law to report it to the Florida Department of Health.

12. Correctional institution

Should you be an inmate of a correctional institution, we may disclose to the institution or agents thereof health information necessary for your health and the health safety of other individuals.

13. Law Enforcement

We may disclose PHI for law enforcement purposes as required by law or in response to a valid subpoena.

14. Workers' compensation

We may disclose PHI 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.

Federal law makes provision for your PHI 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.

Notice of Health Information Practices

PLEASE REVIEW THIS NOTICE CAREFULLY

INTRODUCTION

THIS NOTICE DESCRIBES HOW INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION

At Professional Park Pediatrics, we are committed to treating and using PHI about you responsibly. This Notice of Health Information Practices describes the personal information we collect, and how and when we use or disclose this information. It also describes your rights as they relate to your PHI. This Notice is effective April 14, 2003, and applies to all PHI as defined by federal regulations.

YOUR RIGHTS REGARDING YOUR CHILD'S PHI

You have the following rights regarding the PHI that we maintain about your child:

1. Understanding Your Health Record/Information

Each time you visit Professional Park Pediatrics, a record of your visit is made. Typically, this record contains your symptoms, examination and test results, diagnoses, treatment, and a plan for future care or treatment. This information, your PHI, serves as a:

- basis for planning your care
- 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 PHI is used helps you to: ensure its accuracy, better understand who, what, when, where, and why others may access your PHI, and make more informed decisions when authorizing disclosure to others.

2. Your Health Information Rights

Although your health record is the physical property of Professional Park Pediatrics, 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 PHI as provided for in 45 CFR 164.524
- amend your health record as provided in 45 CFR 164.528
- obtain an accounting of disclosures of your PHI as provided in 45 CFR 164.522
- revoke your authorization to use or disclose health information except to the extent that action has already been taken

3. Our Responsibilities

Professional Park Pediatrics is required to:

- maintain the privacy of your health information
- provide you with this 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 requested restriction
- accommodate reasonable requests you may have to communicate PHI by alternative means or at alternative locations

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

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 PHI after we have received a written revocation of the authorization according to the procedures included in the authorization.

4. For More Information or to Report a Problem

If you have questions and would like additional information, you may contact the practice's Privacy Officer, Lori at (850) 402-5454. If you believe your rights have been violated, you can file a complaint with the practice's Privacy Officer, or with the U.S. Department of Health and Human Services. There will be no retaliation for filing a complaint with either the Privacy Officer or the U.S. Department of Health and Human Services. The address for U.S. Department of Health and Human Services is listed below:

U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, D.C. 20201
Toll Free Call Center: 1-877-696-6775