

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.

Uses and Disclosures:

Each time you visit a hospital, physician, or other health care provider, 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, often referred to as protected information (PHI), serves several purposes. At Asthma and Allergy Clinic, PA, these include:

Treatment:

- Basis for planning your care and treatment
- Communication among the many health professionals who contribute to your care
- Legal document describing the care you received
- Means of documenting laboratory test results and radiological examinations
- A record of your medical history from which you can obtain a copy to transfer to another health professional

Payment:

- Means by which you or a third-party payer can verify that services billed were actually provided
- Business office can use your health information to bill you or your insurance company for services provided
- Business office can use your health information to verify you have insurance coverage and what your insurance will cover
- Third-party payers can use your health information to coordinate benefits so they pay correctly
- Business office can use your health information to appeal non-payment of your claim to a third-party payer
- Assignment of benefits will be to the health care provider, as appropriate
- A collections agency can use your health information in their efforts to obtain payment of unpaid medical bills from our office

Health Care Operations:

- Means to educate allied health professionals
- Data source for medical research
- A source of information for public health officials charged with improving the health of the nation
- A tool with which we can assess and continually work to improve the care we render and the outcomes we achieve
- Business office can use your health information to audit the billing process to detect and prevent fraud and abuse

Uses and Disclosures Unique to Asthma and Allergy Clinic, PA:

- We may contact you to provide appointment reminders and/or test results.
- We may contact you to provide information about treatment alternatives or other health-related benefits and services that may be of interest to you.
- If the practice is sold, all patient records will be transferred to the new owner(s).
- Product vendors may visit the facility for observation or educational purposes (for example, pharmaceutical representatives).
- We will infer that you agree to the release of your protected health information, as appropriate, to your spouse or a friend if either of them accompanies you to the office for your appointment.

Asthma and Allergy Clinic, PA, may also use and/or give out your health information for the following reasons:

As required by the United States Department of Health and Human Services. This could be as part of an investigation or to determine if we are obeying the law.

- Protected information may be disclosed in the course of certain judicial or administrative proceedings.

- Medical information may be disclosed for law enforcement purposes or other specialized governmental functions.
- Your protected information may be disclosed as authorized by laws relating to workers' compensation or similar programs.

Asthma and Allergy Clinic, PA, will not use or disclose your protected information for any other purpose without your written authorization. Once given, you may reverse your authorization in writing at any time.

Individual Rights

You have the following rights regarding your protected health information:

- You may request restrictions in writing on certain uses and disclosures of your protected information. Asthma and Allergy Clinic, PA, is required to honor your request for any services paid out of pocket. However, in the case of covered services, in certain instances, Asthma and Allergy Clinic, PA , is not required to agree to your request restrictions.
- You have the right to receive communications from Asthma and Allergy Clinic, PA, in a confidential manner.
- You have the right to inspect and copy your medical information. This right is subject to certain specific exceptions and you may be charged a reasonable fee for any copies, mailing, and/or summarizing of your records.
- You have the right to request an amendment of your medical information. The request must be in writing and must include a reason that the amendment be included. Asthma and Allergy Clinic, PA, may deny your request for certain specific reasons. If denied, the organization will provide you with a written explanation for the denial and information regarding further rights you would have at that point.
- You have the right to receive a record of the disclosures of your medical information made by Asthma and Allergy Clinic, PA, in the six years prior to your request, except for disclosures for treatment and/or payment, and for certain other specific disclosure types.
- You have the right to request a paper copy of this Notice of Privacy Practices for Protected Health Information.
- You have the right to be notified if we have a security breach and protected health information (PHI) is released in error.

Our Duties

Asthma and Allergy Clinic, PA, is dedicated to protecting your medical information. We are required by law to maintain the privacy of protected health information and to provide you with this Notice of our legal duties and privacy practices regarding protected health information. Asthma and Allergy Clinic, PA, is required by law to abide by the terms of this Notice, and we reserve the right to change the terms of this Notice and any revision will apply to all the protected health information we maintain. If Asthma and Allergy Clinic, PA, revises the terms of this Notice, we will post a revised notice and will make paper copies of this Notice of Privacy Practices for Protected Health Information available upon request.

Complaints

If you believe your privacy rights have been violated, you have the right to complain to Asthma and Allergy Clinic, PA, and/or to the United States Department of Health and Human Services. To complain to Asthma and Allergy Clinic, PA, please contact the organization's Privacy Officer at 850 747-3665 or by writing to Asthma and Allergy Clinic, PA at 2687 Jenks Avenue, Panama City, FL, 32405. If you choose to file a complaint, you will not be retaliated against in any way.

Contact Information

If you would like further information regarding your rights or regarding the uses and disclosures of your protected health information, you may contact Asthma and Allergy Clinic, PA,'s Privacy Officer at 850 747-3665.

Effective Date

This Notice is effective as of April 7, 2003. This notice has been updated according to the HIPAA Ominbus Final Rule, effective March 2013, and required as of September 23, 2013.

Notice of Privacy Practices Acknowledgement of Receipt

I, _____, acknowledge receipt of Asthma and Allergy Clinic, PA,'s Notice of Privacy Practices which was effective April 7, 2003.

Patient Signature: _____

Patient Printed Name: _____

Date Signed: _____

For office use only:

We were unable to obtain a written Acknowledgement of Receipt for the following reason(s):

Printed Name: _____

Written Name: _____

Title: _____

Date: _____

