

NOTICE OF PRIVACY POLICIES FOR PEDIATRIC PROFESSIONAL ASSOCIATES, P.C.

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

Introduction

At **Pediatric Professional Associates, P.C.**, we are committed to treating and using protected health information about your child responsibly. This Notice of Health Information Practices describes the personal information we collect, and how and when we use or disclose that information. It also describes your rights as they relate to your child's protected health information. This Notice is effective April 14, 2003, and applies to all protected health information as defined by federal regulations.

Understanding Your Child's Health Record/Information

Each time you visit **Pediatric Professional Associates, P.C.**, a record of your child's visit is made. Typically, this record contains your child's symptoms, examination and test results, diagnoses, treatment, and a plan for future care or treatment. This information, often referred to as your child's health or medical record, serves as a:

- Basis for planning your child's care and treatment,
- Means of communication among the many health professionals who contribute to your child's care,
- Legal document describing the care your child 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 child's record and how your child's health information is used helps you to: ensure its accuracy, better understand who, what, when, where, and why others may access your child's health information, and make more informed decisions when authorizing disclosure to others.

Your Child's Health Information Rights

Although your child's health record is the physical property of **Pediatric Professional Associates, P.C.**, the information belongs to you. You have the right to:

- Obtain a paper copy of this notice of information practices upon request,
- Look at or get copies of your child's medical information. You must make your request in writing. You may ask the receptionist for the form needed to request access. There is a charge for copying and for postage if you want the copies mailed to you. Ask the receptionist about our fee structure.
- Obtain an accounting of disclosures of your child's health information,
- Request communications of your child's health information by alternative means,
- Request that we place additional restrictions on our use or disclosure of your child's medical information. We are not required to agree to these additional restrictions, but if we do, we will abide by our agreement (except in the case of an emergency).
- Request that we change your child's medical information. We may deny your request if we did not create the information you want changed or for certain other reasons. If we deny your request, we will provide you with a written explanation. You may respond with a statement of disagreement that will be added to the information you wanted changed. If we accept your request to change the information, we will make reasonable efforts to tell others, including people you name, of the change and to include the changes in any future sharing of that information.

Our Responsibilities

Pediatric Professional Associates, P.C. is required to:

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

We reserve the right to change our practices and to make the new provisions effective for all protected health information we maintain.

We will not use or disclose your child's health information without your authorization, except as described in this notice. We will also discontinue to use or disclose your child's health information after we have received a written revocation of the authorization.

Special Situations

We take pride in the patients we treat. As you may have noticed we have prepared various collages of patients we treat in our office. Please be aware that we may post pictures of your child/children/family in our office.

Examples of Disclosures for Treatment, Payment and Health Operations

We will use your child's health information for treatment.

For example: Information obtained by a nurse, physician, or other member of your child's health care team will be recorded in their record and used to determine the course of treatment that should work best for your child. Your child's provider will document in your child's record his or her expectations of the members of your child's health care team. Members of your child's health care team will then record the actions they took and their observations. In that way, the provider will know how your child is responding to treatment.

We will also provide your child's physician or a subsequent health care provider with copies of various reports that should assist him or her in treating your child once he/she is discharged from this hospital.

We will use your child's 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 your child, as well as your child's diagnosis, procedures, and supplies used.

We will use your child's health information for regular health operations.

For example: Members of the medical staff, the risk or quality improvement manager, or members of the quality improvement team may use information in your child's health record to assess the care and outcomes in your child's case and others like it. This information will then be used in an effort to continually improve the quality and effectiveness of the healthcare and service we provide.

Business associates: There are some services provided in our organization through contacts with business associates. Examples include physician services in the emergency department and radiology, certain laboratory tests, and a copy service we use when making copies of your child's health record. 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 child's health information, however, we require the business associate to appropriately safeguard your child's information.

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 child's care or payment related to your child's care.

Appointment Reminders: We may disclose your child's health information to remind you of appointments you have made in our office or elsewhere.

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.

Workers compensation: We may disclose health information 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.

Public health: As required by law, we may disclose your child's 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.

Incidental Disclosure: The modification explicitly would permit certain incidental uses and disclosures that occur as a result of an otherwise permitted use or disclosure. A disclosure is incidental if it is limited in nature and cannot reasonably be prevented.

Federal law makes provision for your child's 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.

For More Information or to Report a Problem

If have questions and would like additional information, you may contact the practice's Privacy Officer at 978-683-1974.

If you believe your privacy rights have been violated, you can file a complaint with the practice's Privacy Officer, or with the Office for Civil Rights, U.S. Department of Health and Human Services. There will be no retaliation for filing a complaint with either the Privacy Officer or the Office for Civil Rights. The address for the OCR is listed below:

Office for Civil Rights
U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Room 509F, HHH Building
Washington, D.C. 20201

Revision: 4/14/11