

NOTICE OF PRIVACY PRACTICES

ARTHRITIS CONSULTANTS OF TIDEWATER
933 First Colonial Road, #100 Virginia Beach VA 23454 (757) 491-7359

Typical Uses and Disclosures of Medical Information

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.

This Notice of Privacy Practices describes how we may use and disclose your protected health information to carry out treatment, payment or health care operations and for other purposes that are permitted or required by law. It also describes your rights to access and control your protected health information. "Protected health information" is information about you, including demographic information, that may identify you and that relates to your past, present or future physical or mental health or condition and related health care services.

We are required to abide by the terms of this Notice of Privacy Practices. We may change the terms of our notice, at any time. The new notice will be effective for all protected health information that we maintain at that time. Upon your request, we will provide you with any revised Notice of Privacy Practices by calling the office and requesting that a revised copy be sent to you in the mail or asking for one at the time of your next appointment.

Section 1.01 We will keep your health care information confidential, using it for the following purposes:

- (a) Treatment - We will use the health care information we learn about you to provide you with health care services.
 - (i) The following people in our office will have access to your information:
 - 1) *Medical staff - doctors, physician assistants and nurse practitioners*
 - 2) *Nursing staff - registered nurses, licensed practical nurses, and medical assistants*
 - 3) *Other clinical staff - phlebotomists, laboratory technologists and technicians*
 - 4) *Reception staff*
 - 5) *Medical records personnel*
 - (ii) We have established standards and procedures that limit various staff members' access to your health information according to their primary job functions. These standards and procedures may change from time to time. All of our staff is required to sign a confidentiality statement.
 - (iii) We will share your health care information with other health care providers involved in your care.
 - 1) *When we admit you to the hospital, we will share your health care information with personnel of that hospital. That hospital will have a privacy and confidentiality policy like this one. If you have questions about their policy, you should ask them.*
 - 2) *When we refer you to a specialist, we will share your health care information with them. We will send this information whether you actually see the specialist (for example, a surgeon) or whether you do not (for example, if we send a specimen to a laboratory for analysis). That specialist will have a privacy and confidentiality policy like this one. If you have questions about their policy, you should ask them.*
 - 3) *When we submit laboratory specimen to reference laboratories, and/or pathologists.*

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- (iv) We will share your health care information with other people associated with your care at our office. These include:
 - 1) *Family members you involve in your care*
 - 2) *Friends you choose to include in your care*
 - 3) *Other caregivers you chose to involve in your care*
 - 4) *Other parties actively involved in your care*
- (b) Payment - we will use and disclose your health care information to seek reimbursement for services we render you and members of your household. In this process, other parties may have access to the information you give us.
 - (i) In this context, these parties include:
 - 1) *Our business office staff*
 - 2) *The insurance organizations involved in your care*
 - 3) *An organization that mails our statements to you*
 - 4) *If one is required, the collection agency we use to collect unpaid balances.*
 - 5) *Other firms that become involved in the process of processing or reviewing payment activities.*
 - 6) *Organizations that may aid in verifying benefits and coverage of certain treatments and medications.*
- (c) Health Care Operations - we will use and disclose your health information to keep our practice operable.
 - (i) Examples of this kind of personnel include, but are not limited to, the following:
 - 1) *Our medical records staff*
 - 2) *Outside health or management reviewers*
 - 3) *Individuals performing similar activities*
- (d) Governmental Oversight Activities - if we receive proper instruction from a party with applicable jurisdiction, we will use and disclose your health information to support activities associated with audits, investigations, license reviews, applications for privileges, and in compliance with governmental programs and laws.
- (e) As required by law - we will use and disclose your health care information as required by a court or administrative order, subpoena, discovery request, or other lawful process. We will use and disclose your information when requested by national security, intelligence, and other State and Federal officials, and/or if you are an inmate or otherwise under the custody of law enforcement.
- (f) For appointment reminders - we will use and disclose your health information to remind you of appointments you have made in our office or elsewhere.
- (g) Research - we will use and disclose your health information to participate in research programs that have proper governmental approval. If your information is to be presented in a format that would allow individual identification, we will seek your written authorization before disclosing it.
- (h) Upon military command - if you currently serve in the military or are a veteran, we will disclose your information upon proper military command.
- (i) To prevent a serious threat to health or safety - if a licensed member of our staff determines, in his or her best professional judgment, that there is a serious threat to the health or safety of you or some other individual, we will disclose your health information to the proper authorities.
- (j) To discharge public health responsibilities - We will disclose your health care information to report deaths, child abuse, neglect, domestic violence, problems with products, reactions to medications, product recalls, disease/infection exposure, and

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to prevent and control disease, injury, and disability.

Your Privacy Rights

You have the right to:

Section 2.01 Inspect and copy your health care information, or that of an individual for whom you are a legal guardian.

- (a) If you wish to examine your health care information, you will need to complete and submit a form.
- (b) After we receive the form, we will determine whether to permit you to examine your health care information. In some cases, we may refuse to permit you to do so. Examples of reasons why we would refuse include, but are not limited to, the following: A determination that doing so might harm you, or might harm another person.
- (c) While reviewing the information, you will have the right to a copy of parts or all of your health care information. We may charge a fee for this service.

Section 2.02 You have the right to amend health care information, if you feel it is inaccurate or incomplete.

- (a) To request an amendment to your health care information, you may complete and submit the appropriate form.
- (b) We will review your request to amend your record. We may decide to deny the amendment. Examples of reasons why we would refuse include, but are not limited to, the following: If we feel it is false or misleading, or could harm you or some other person.
- (c) You may write a statement of disagreement if your request is denied. This will be stored in your record.

Section 2.03 You have the right to receive a list of non-routine disclosures we have made of your health care information.

- (a) When we refer you to a specialist as described above, we make a routine disclosure of your health care information that we think will be necessary and appropriate for treatment, payment, and health care operations. We do not keep record of these routine disclosures.
- (b) You can request a list of non-routine disclosures of your health care information we have made. We will provide you a list of these disclosures during the subsequent six years, beginning with April 14, 2003. To request a list of these disclosures of your health care information, you may complete and submit a request form. Additional copies are available separately.

Section 2.04 You have the right to request a limit to the health care information we disclose about you.

- (a) If you wish to do so, write a letter describing your concerns and wishes to your physician or to our Privacy Officer.
- (b) We are not obligated to acquiesce to your request. However, if we do agree, we will comply with your requests in all subsequent decisions to use and disclose your health care information.

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Section 2.05 *You have the right to request confidential communications.*

- (a) In general, we will not disclose your health care information except as described above. If, however, you wish us to restrict further the parties who will have access to your information, write a letter describing your concerns and wishes to your physician or to our Privacy Officer.
- (b) We are not obligated to acquiesce to your request. However, if we do agree, we will comply with your requests in all subsequent decisions to use and disclose your health care information.

Your Right to Complain

Section 3.01 *You have the right to file a complaint with us about our adherence to these policies.*

- (a) Your complaint should be directed to our Privacy Officer, Dr. Janice Sherwood.
- (b) You can either write a letter addressed to the Privacy Officer, or complete and submit a complaint form to Dr. Janice Sherwood, 933 First Colonial Road, Suite 100, Virginia Beach VA 23454.

Section 3.02 *You have the right to file a complaint with the Secretary of Health and Human Services.*

- (a) You should write a letter describing your concerns to the secretary of the Department of Health and Human Resources.

Effectiveness and Subsequent Modification

Section 4.01 *We reserve the right to change this policy, and the associated procedures, without notice.*

Section 4.02 *This policy is effective on and after April 13, 2003. Complete copies are available from the Privacy Officer. Abbreviated copies are posted at our reception areas.*

Contact Information

Section 5.01 *If you have questions about this policy, contact our Privacy Officer. As of the adoption of this policy, the Privacy Officer is Dr. Janice Sherwood, and can be contacted at 757-491-7359.*

Notice Effective Date

Section 6.01 *This notice is effective as of April 13, 2003.*