

**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.

The Health Insurance Portability & Accountability Act of 1996 ("HIPAA") is a federal program that requires that all medical records and other individually identifiable health information used or disclosed by us in any form, whether electronically, in paper, or orally, are kept properly confidential. This Act gives you, the patient, significant new rights to understand and control how your health information is used. HIPAA provides penalties for covered entities that misuse personal health information.

As required by HIPAA, Scott Kwiatkowski D.O., P.C. has prepared this explanation of how we are required to maintain the privacy of your health information and how we may use and disclose your health information.

Scott Kwiatkowski D.O., P.C. may use and disclose your medical records only for each of the following purposes: treatment, payment, and health care operations.

- ! Treatment means providing, coordinating, or managing health care and related services by one or more health care providers. An example of this would include a physical examination.
- ! Payment means activities such as obtaining reimbursement for services, confirming coverage, billing or collection activities, and utilization review. An example of this would be sending treatment notes to your insurance company to validate a claim.
- ! Health care operations include the business aspects of running the practice, such as conducting quality assessment and improvement activities, auditing functions, cost-management analysis, and customer service. An example would be an internal quality assessment review.

Scott Kwiatkowski D.O., P.C. may also create and distribute health information by removing all references to any individually identifiable information.

Scott Kwiatkowski D.O., P.C. 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. An example would be a periodic newsletter.

Any other uses and disclosures will be made only with your written authorization. You may revoke such authorization in writing except to the extent that Scott Kwiatkowski D.O., P.C. has already taken actions relying on your authorization.

You have the following rights with respect to your protected health information, which you can exercise by presenting a written request to the Privacy Officer:

- ! The right to request restrictions on certain uses and disclosures of protected health information, including those related to disclosures to family members, other relatives, close personal friends, or any other person identified by you. However, Scott Kwiatkowski D.O., P.C. is not required to agree to the restrictions requested. If a restriction is agreed to, it must be abided by unless you agree in writing to remove it.
- ! The right to reasonable requests to receive confidential communications of protected health information from us by alternative means or at alternative locations.
- ! The right to inspect, copy, and amend your protected health information.
- ! The right to receive an accounting of disclosures of protected health information.
- ! The right to obtain a paper copy of this notice form us upon request.

Scott Kwiatkowski D.O., P.C. is required by law to maintain the privacy of your protected health information and to provide you with notice of the legal duties and privacy practices with respect to protected health information. This Notice is effective as of 15<sup>th</sup> April, 2003. Scott Kwiatkowski D.O., P.C. reserves the right to change the terms of the Notice and to make the new notice provisions effective for all protected health information that Scott Kwiatkowski D.O., P.C. maintains.

Scott Kwiatkowski D.O., P.C. will post and you may request a written copy of a revised Notice from this office.

You have recourse if you feel that your privacy protections have been violated. You have the right to file a written complaint with Scott Kwiatkowski D.O., P.C., or with the Department of Health & Human Services, Office of Civil Rights, about violations of the provisions of this notice or the policies and procedures of our office. Scott Kwiatkowski D.O., P.C. will not retaliate against you for filing a complaint. Please contact Scott Kwiatkowski D.O., P.C. for more information: (301) 718-3696.

For more information about HIPAA or to file a complaint:

The U.S. Department of Health & Human Services, Office of Civil Rights  
200 Independence Avenue, S.W. Washington, D.C. 20201

Call: (202) 619-0257  
Toll Free: (877) 696-6775