

CHIROPRACTIC CENTER FOR HEALING 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 Chiropractic Center for Healing is required, by law, to maintain the privacy and confidentiality of your protected health information and to provide our patients with notice of our legal duties and privacy practices with respect to your protected health information.

This office utilizes an "open-door" adjusting environment for ongoing patient care. This means that when a patient is finished with treatment, payment and scheduling transactions occur in an open area and are sometimes being completed while the next patient is brought into the treatment area. Patients are within sight of one another and some ongoing routine details of care may be discussed within earshot of other patients and staff. This environment is used for transitional care and is *not* the environment used for taking patient histories, providing examinations or presenting reports of findings. These procedures are completed in a private, confidential setting. The use of this format is intended to make your experience with our office more efficient and productive as well as to enhance your access to quality health care and health information. If you choose not to be adjusted in an open-door adjusting environment, other arrangements will be made for you.

Disclosure of Your Health Care Information

Treatment

We may disclose your health care information to healthcare professionals within our practice for the purpose of treatment, payment or healthcare operations.

It may be necessary to seek consultation regarding your condition from other health care providers associated with The Chiropractic Center for Healing.

In the event of your primary health care provider's absence due to vacation, sickness, or other emergency situation, a substitute health care provider, authorized by The Chiropractic Center for Healing, may provide assessment and/or treatment to our patients, without advanced notice.

Payment

We may disclose your health information to your insurance provider for the purpose of payment or health care operations.

At the time of payment we will, on request, provide an itemized billing to you for the purpose of reimbursement from your insurance. The billing statement contains medical information, including diagnosis, date of injury or condition, and codes that describe the health care services received.

Workers'

We may disclose your health information as necessary to comply with State Workers' Compensation Laws.

Compensation**Marketing and Appointment Reminders**

We may contact you for marketing purposes, as described below:

The Chiropractic Center for Healing may periodically send patients a newsletter with preventive health and/or office news. In addition, this office regularly sends birthday cards to patients and thank you cards to those who have referred new patients to us. Only the name of the new patient is included in the thank you note.

Occasionally, we may call your home or work prior to your scheduled appointment to remind you of your appointment time. If necessary, we may leave a reminder message on your voicemail or with the person answering the phone. No personal health information will be disclosed during this message other than the date and time of your scheduled appointment along with a request to call our office if you need to cancel or reschedule your appointment. *If you would like to receive messages at an address or phone number other than your home or, if you would like the information in a different form, please advise us in writing.*

Emergencies

We may disclose your health information to notify or assist in notifying a family member, or another person responsible for your care about your medical condition or in the event of an emergency or of your death.

Public Health

As required by law, we may disclose your health information to public health authorities for purposes related to preventing or controlling disease; injury or disability; reporting child abuse or neglect; reporting domestic violence; reporting to the Food and Drug Administration problems with products and reactions to medications; and reporting disease or infection exposure.

Judicial and Administrative Proceedings

We may disclose your health information in the course of any administrative or judicial proceeding.

Law Enforcement

We may disclose your health information to a law enforcement official for purposes such as identifying or locating a suspect, fugitive, material witness or missing person, complying with a court order or subpoena, and other law enforcement purposes.

Deceased Persons

We may disclose your health information to coroners or medical examiners.

Organ Donation

We may disclose your health information to organizations involved in procuring, banking, or transplanting organs and tissues.

Research

We may disclose your health information to researchers conducting research that has been approved by an Institutional Review Board.

Public Safety

It may be necessary to disclose your health information to appropriate persons in order to prevent or lessen a serious and imminent threat to the health or safety of a particular person or to the general public.

Specialized Government Agencies

We may be required to disclose your health information for military, national security, prisoner and government benefits purposes.

Change of Ownership

In the event that The Chiropractic Center for Healing is sold or merged with another organization, your health information/record will become the property of the new owner.

Your Health Information Rights

- You have the right to request restrictions on certain uses and disclosures of your health information. Please be advised, however, that The Chiropractic Center for Healing is not required to agree to the restriction that you requested.
- You have the right to have your health information received or communicated through an alternative method or sent to an alternative location other than the usual method of communication or delivery, upon your request.
- You have the right to inspect and copy your health information.
- You have a right to request that The Chiropractic Center for Healing amend your protected health information. Please be advised, however, that The Chiropractic Center for Healing is not required to agree to amend your protected health information. If your request to amend your health information has been denied, you will be provided with an explanation of our denial reason(s) and information about how you can disagree with the denial.
- You have a right to receive an accounting of disclosures of your protected health information made by The Chiropractic Center for Healing.
- You have a right to a paper copy of this Notice of Privacy Practices at any time upon request.

Changes to this Notice of Privacy Practices

The Chiropractic Center for Healing reserves the right to amend this Notice of Privacy Practices at any time in the future, and will make the new provisions effective for all information that it maintains. Until such amendment is made, The Chiropractic Center for Healing is required by law to comply with this Notice.

The Chiropractic Center for Healing is required by law to maintain the privacy of your health information and to provide you with notice of its legal duties and privacy practices with respect to your health information. If you have questions about any part of this notice or if you want more information about your privacy rights, please contact the Office Manager by calling this office at (510) 419-0776. If the Office Manager is not available, you may make an appointment for a personal conference in person or by telephone within 2 working days.

Complaints

Complaints about your Privacy rights, or how The Chiropractic Center for Healing has handled your health information should be directed to the Office Manager by calling this office at (510) 419-0776. If the Office Manager is not available, you may make an appointment for a personal conference in person or by telephone within 2 working days.

If you are not satisfied with the manner in which this office handles your complaint, you may submit a formal complaint to:

DHHS, Office of Civil Rights
200 Independence Avenue, S.W.
Room 509F HHH Building
Washington, DC 20201

This notice is effective as of April 14, 2003.