



NOTICE OF PRIVACY PRACTICES (Effective 5/1/2017)

How can we disclose your private, protected healthcare information?

Pine River Physical Therapy, LLC may use and disclose your protected healthcare information. Below is a list of way in which we may release information.

Disclosure for healthcare related purposes including -

- Treatment of your illness or diagnosis including sharing your information with other healthcare professionals that are treating you.
- Running our operations.
- For billing and obtaining payment from your insurance company.
- Supporting our healthcare operations such as comparing data to improve and manage your treatment or services.
- Communication with Business Partners. All business partners are required under contract and by law to abide by provisions of HIPAA and protect your healthcare information.

Disclosure to other organizations including -

- Public health agencies
- Abuse or Neglect reporting
- Health oversight or inspection audits
- Research studies
- Workers Compensation purposes
- Emergencies

Disclosure to legal agencies including -

- Valid judicial or administrative orders
- The government if you are a Veteran or Active Military

Disclosure for contacting you including -

- Appointment Reminders
- Possible treatment options and alternatives
- Health related benefit or services of interest to you
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Disclosure to friends and/or family -

- No protected healthcare information will be disclosed without the written release from the patient and/or guardian except
 - o When patient is a minor.
 - o In cases of disaster relief requiring notification
 - o When another person is paying for your services.

Disclosure in special circumstances

- In any other circumstance not covered by this notice, we will ask for your written authorization before using or disclosing your medical information. If you choose to authorize use or disclosure you can later revoke that authorization by notifying us in writing of your decision.

YOUR RIGHTS

You have the right to review and obtain an *electronic or paper* copy of your medical records or other healthcare information we may have about you. Ask us how to do this. We will provide copies, usually within 30 days of your request. If copies are required Pine River Physical Therapy may charge a reasonable, cost-based fee.

You have a right to request a paper copy of this privacy notice at any time.

If you believe your medical records are inaccurate you have the right to request a correction to your records by submitting a written request. We may deny your request if the information was obtained by another healthcare profession, is not part of the medical record which we maintain, or if we determine the record is accurate.

You have a right to know who we have shared your protected healthcare information in regards to treatment, payment from an insurance company, healthcare operations or where you have specifically authorized a disclosure. Requests must be in writing and include a specific time period which must be less than 7 years. We will honor one access request per year for no charge, but may charge a reasonable fee for any additional requests within one 12-month period.

You may request that your medical record be communicated to you in a confidential manner, such as sending to an email address other than to your home. You may request specifically when and where you want to be contacted. We will attempt to honor all reasonable requests.

You may request in writing that we not use or disclose your medical information for treatment, payment from an insurance company or for healthcare operations, or to persons involved in your care except when specifically authorized by you, or when required by law. We are not required to honor your request if it would affect your care. All written requests must include whether you want to limit use or disclosure and to whom it applies. **If you choose to restrict use and disclosure to your insurance company, you will be liable for the full cost of your care at the time of service.**

If you have a concern or complaint regarding your protected healthcare information you may contact Donald Mooney (Business Manager/Privacy Officer) at Pine River Physical Therapy, LLC at 970.884.2956

or you can file a written notice with the US Health and Human Services Office of Civil Rights by sending a letter to –

US Dept. of Health and Human Services
Office for Civil Rights
200 Independence Ave SW
Washington, D.C. 20301

Or by calling (877) 696-6775 or visiting www.hhs.gov/ocr/privacy/hipaa/complaints/.

Under no circumstances will you be penalized for filing a complaint and we will not retaliate against you for filing a complaint.

OUR RESPONSIBILITIES

We are required by law to maintain privacy and security of your protected healthcare information.

You will be notified if there is any breach of your protected healthcare information if records have not been deemed unreadable, unusable, or indecipherable.

We understand that your medical records are private and confidential. We create a medical record because it is our legal obligation, but most importantly because we want to provide you with quality medical care.

Pine River Physical Therapy, LLC, knows you are concerned with how information might be used, how it is disclosed, and how you can access that information. Please know that we are committed to protecting your health information.

For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html.

Changes to Terms of this notice: We can change the terms of this notice, and the changes will apply to all information we have about you. A new notice will be available upon request, in our office, and on our website.

THIS NOTICE APPLIES TO THE FOLLOWING ORGANIZATIONS:

Pine River Physical Therapy

480 Wolverine Dr, Suite 5

Bayfield, CO. 81122

Privacy Officer: Donald Mooney

(970) 884-2956 (office)

(970) 903-8895 (cell)