It is our policy to preserve the integrity and the confidentiality of protected health information (PHI) pertaining to our patients. The purpose of this policy is to ensure access to the necessary medical and PHI to provide the highest quality medical care possible while protecting the confidentiality of the PHI of our patients to the highest degree possible. Patients should not be afraid to provide information to our practice and its physicians and staff for purposes of treatment, payment and health care operations (TPO). To that

end, we will:

• Adhere to the standards set forth in the Notice of Privacy Practices.

* Collect, use and disclose PHI only in conformance with current regulations, laws and current patient covenants and/or authorizations, as appropriate. We will not use or disclose PHI for uses outside of TPO, such as marketing, employment, life insurance applications, etc., without an authorization from the patient.
* Use and disclose PHI to remind patients of their appointments only with their consent.
* Recognize that PHI collected about patients must be accurate, timely, complete, and available when need ed. With that goal in mind we will:

o Implement reasonable measures to protect the integrity of all PHI maintained about patients.

• Recognize that patients have a right to privacy. We will respect \

patient’s privacy to the extent consistent with providing the highest quality medical care possible and with the efficient administration of our services.

* Act as responsible information stewards and treat all PHI as sensitive and confidential. Consequently, we will:

o Treat all PHI data as confidential in accordance with professional

ethics, accreditation standards, and legal requirements.

 o Not disclose PHI data unless the patient (or his or her authorized

representative) has properly consented to or authorized the release or the release is otherwise authorized by law.

• Recognize that, although we “own” the medical record, the patient

 has a right to inspect and obtain a copy of his/her PHI. In addition,

patients have a right to request an amendment to his/her medical record if he/she believe his/her information is inaccurate or incomplete. Based on that preamble, we will:

 o Permit patients access to their medical records when their written

 requests are approved and have followed our internal protocols.

 If we deny their request, then we must inform the patients that
 they may request a review of our denial. In such cases, we will

 have an on-site professional or board to review the patients’

 appeals.

 o Provide patients an opportunity to request the correction of in

 accurate or incomplete PHI in their medical records in

 accordance with the law and professional standards.

* We will maintain a list of all disclosures of PHI for purposes other than TPO for each patient. We will provide this list to patients upon request, so long as their requests are in writing.
* We will adhere to any restrictions concerning the use or disclosure of PHI that patients have requested and have been approved by the Privacy Officer or the designated person.

• We will adhere to this policy. We will not tolerate violations of this

 policy. Violation of this policy is grounds for disciplinary action, up

 to and including termination of employment and criminal or

 professional sanctions in accordance with our personnel rules and

 regulations.

We may change this privacy policy in the future. Any changes will be effective upon the release of a revised privacy policy and will be made available to patients upon request.