

Notice of Privacy Practices

Andover Pediatrics, P.C.

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.

If you have any questions about this notice please contact: Diane Alie, our Privacy Officer.

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

We reserve the right to change our practices and to make the new provisions effective for all protected health information we maintain. You may request a revised notice by calling the office or asking when you are in the office for an appointment. A copy of this and all future notices will be posted in our office.

Each time you visit a hospital, physician or other healthcare provider, a record of your visit is made. Typically, this record contains your symptoms, examination and test results, diagnoses, treatment and a plan for future treatment. This record of information serves as a basis for planning your care and treatment. Understanding what is in your record helps you to make decisions regarding authorizing disclosures to others.

Your Health Information Rights – Although your health record is the physical property of Andover Pediatrics, P.C., the information belongs to you. You have the right to request a restriction on certain disclosures, obtain a paper copy of the notice of information privacy practices, inspect and receive a copy of your health record, amend your health record, obtain an accounting of disclosures and revoke your authorization to use or disclose health information except to the extent that action has already been taken.

Our Responsibilities – Andover Pediatrics, P.C. is required to maintain the privacy of your health information as required by law, provide you with a notice of privacy practices, abide by the terms of this notice, notify you if we are unable to agree to a request.

Uses and Disclosures of PHI by Andover Pediatrics, P.C. – We are permitted to disclose PHI for treatment purposes. We will use and disclose information to provide, coordinate, or manage your healthcare. This includes disclosure to a third party. For example, we would disclose your PHI, as necessary, to a physician to whom you have been referred or home health agency that provides care to you. We will also provide information to a health care provider (e.g. laboratory, radiology) to assist with your health care diagnosis and treatment. Your PHI will be used, as needed, to obtain payment and may be given to companies (i.e. insurance, home care, third party payors), which need the information to determine eligibility or coverage for insurance benefits, reviewing services for medical necessity and utilization review processes. We may use or disclose, as needed, your PHI in order to support the business activities of Andover Pediatrics, P.C. This may include, but is not limited to, quality assessments, training of medical students, or other business activities. For example, we may disclose PHI to medical school students that see patients in our office. We may also use a sign in sheet at the front desk, call you by name in the waiting room, or contact you to remind you about an appointment. Unless you object, we may disclose to a member of your family or any other person you identify, your PHI. We may also notify a family member, guardian, or another person who is responsible for your care in an emergency situation.

Required by Law – The following disclosures are required by law

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|------------------------|-------------------------------|-------------------------|
| - Public Health Issues | - Correctional Institution | - Communicable Diseases |
| - Abuse/Neglect | - FDA | - Legal Proceedings |
| - Law Enforcement | - Coroners, Funeral Directors | - Research |
| - Military | - Government Audit Agencies | - Workers' Compensation |

Following is a statement of your rights with respect to your PHI.

You have the right to inspect and receive a copy of your PHI. Under federal law, however, you may not inspect or copy psychotherapy notes, information compiled in anticipation of, or use in, a civil, criminal, or administrative action. All requests need to be addressed in writing to our Privacy Officer, Diane Alie. There may be a reasonable charge associated with the copying of records.

You have the right to request a restriction of your PHI. You may ask us not to disclose any part of your PHI for the purposes of treatment, payment or healthcare operations. You may also ask us not to disclose this information to family members or legal representatives who may be involved in your care. There are some instances in which a request may not be honored due to the nature of the request (examples of which may be but are not limited to a request from DPH, or legal restrictions an example of which is a custody issue). Your request must be in writing and must state the specific restriction requested and to whom you want the restriction to apply.

We are not required to agree to a restriction that you may request. If we do agree, we may still disclose PHI if it is needed to provide emergency treatment. If you choose not to disclose PHI and by doing so it prohibits us from providing care, we may choose to terminate our relationship with you. You will be given notice, in writing, of our request.

You have the right to request to receive confidential communications from us. We will accommodate reasonable requests.

You may have the right to have your record amended. Generally, if you feel your record is not accurate, you may request this amendment. Please notify our Privacy Officer, Diane Alie, in writing, of your request. We may deny your request and will notify you, in writing, of the status of your request.

You have the right to receive an accounting of certain disclosures we have made, if any, of your PHI. This right applies to disclosures for purposes other than treatment, payment or healthcare operations.

You have the right to obtain a paper copy of this notice. Please ask the staff to provide one for you.

Complaints – You may complain to our Privacy Officer, Diane Alie, or to the the Secretary of Health and Human Services if you believe your privacy rights have been violated by us. The staff of Andover Pediatrics, P.C. believes in a patient's right to privacy and will disclose only the information which is necessary to provide you with healthcare. We will not retaliate against you for filing a complaint. All complaints will be reviewed by the Privacy Officer and with the physician's.

This notice becomes effective April 14, 2003.