

Privacy Policy

This notice describes how your medical information may be used or disclosed and how you can gain access to it. Please read this notice carefully.

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 is a federal program that requires strict confidentiality for all your personal health information. That includes all your medical information used or disclosed by us in any form, whether electronic, written or verbal. The Act gives you significant rights to understand and control how your health information is used. The Act also provides penalties for the misuse of Protected Health Information (PHI).

PHI is any information about you, including demographic data that identifies you and your past, present or future physical or mental health condition, as well as related healthcare services. This Privacy Policy describes how we may use or disclose your PHI to provide treatment, payment or healthcare operations or other purposes that are permitted or required by law. This policy also describes your rights to access and control your PHI.

Uses and Disclosures of Protected Health Information

Your PHI may be used or disclosed by our physical therapists, office staff or others involved in your care and treatment, whether providing healthcare services to you, paying your healthcare bills, supporting the operation of our practice or any other lawful use.

Treatment: We will use and disclose your PHI to provide, coordinate or manage your healthcare and related services. This includes the coordination or management of your healthcare by a third party. For example, your PHI may be given to a physician you have been referred to in order to ensure that he or she has the necessary information to diagnose or treat you.

Healthcare Operations: We may use or disclose your PHI to support our business activities. These activities may include quality assessment, employee review and conducting or arranging other business activities. We may call you by name in our reception area when your therapists is ready to see you. We may use or disclose your PHI, as necessary, to contact you to remind you of your appointment. We may phone your home and leave a message (on an answering machine or with the person answering the phone) to remind you of an upcoming appointment, the need to schedule a new appointment or to call our office. We may also mail a postcard reminder or letter to your home address. Please tell us if you prefer that we call or contact you at another phone number or location.

Required Uses and Disclosures: The law requires us to disclose to you when we are investigated by the Secretary of the Department of Health and Human Services to determine our compliance with HIPAA. Other permitted and required uses and disclosures will be made only with your consent, authorization or opportunity to object unless required by law. You may revoke this authorization in writing at any time except to the extent that your physician or the physician's practice has taken action in reliance on the use or disclosure indicated in your authorization.

Payment: Your PHI will be used, as needed, to obtain payment for healthcare services.