

We will use your health information for regular health operations.

For example: Members of the medical staff, the Medical Director, director of Risk Management and/or Quality Improvement, or members of the Quality Improvement Team, may use information in your health record to access the care and outcomes in your case and others like it. This information will then be used in an effort to continually improve the quality and effectiveness of the healthcare and service we provide.

Business Associates: There are some services provided in our organization through contacts with business associates. Example include a pharmacist consultant, transcriptionists who transcribe physician dictation that is included in your health record, a computer company whose software we use to file electronic claims, and a collection agency. When we contract for these services, we may disclose your health information to our business associate so that they can perform the job they have contracted with us to do. To protect your health information, however, we require the business associate to appropriately safeguard your information.

Notification: We may use or disclose information to a family member, personal representative, or another person responsible for your care, about your location and general condition. We may leave a telephone message for you or mail information to your address regarding appointments, test results, or other aspects of your care.

Communication with family: Using their best judgment, health professionals may disclose health information to a family member, other relative, close personal friend or any other person you identify, relevant to that person's involvement in your care or payment related to your care.

Research: This office does not currently participate in any research programs. If we do, however, we may disclose information to researchers when their research has been approved by an institution review board that has reviewed the research proposal and established protocols to ensure the privacy of your health information.

Funeral Directors: We may disclose health information to funeral directors consistent with applicable law to carry out their duties.

Organ Procurement Organizations: Consistent with applicable law, we may disclose health information to organ procurement organizations or other entities engaged in the procurement, banking or dispensation of organs for the purpose of tissue donation and transplant.

Marketing: We may contact you to provide appointment reminders or information about treatment alternatives or other health related benefits and services that may be of interest to you.

Food and Drug Administration (FDA): We may disclose to the FDA health information relative to adverse events with respect to food, supplements, product and product defects, or post marketing surveillance information to enable product recalls, repairs or replacements.

Workers Compensation: We may disclose health information to the extent authorized by and to the extent necessary to comply with laws relating to workers compensation or other similar programs established by law.

Public Health: As required by law, we may disclose your health information to public or legal authorities charged with preventing or controlling disease, injury, or disability.

Law enforcement: We may disclose health information for law enforcement purposes as required by law or in response to a valid subpoena.

Federal law also makes provisions for your health information to be released to an appropriate health oversight agency, public health authority or attorney, provided that a workforce member or business associate believes in good faith that we have engaged in unlawful conduct or have otherwise violated professional or clinical standards and are potentially endangering one or more patients, workers or the public.

NOTICE OF PRIVACY POLICIES



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This notice describes how information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

Introduction:

This Notice of Health Information Practices describes the personal information we collect, and how and when we use or disclose that information. It also describes your rights as they relate to your protected health information. This Notice is effective April 14, 2003 and applies to all protected health information as defined by federal regulations.

Understanding your health record/information

Each time you visit this office, we make a record of your visit. Typically, this record contains your symptoms, examination and test results, diagnoses, treatment and a plan for future care or treatment. This information, often referred to as your health or medical record, serves as a:

- Basis for planning your care and treatment
- Means of communication among the many health professionals who contribute to your care
- Legal document describing the care you received
- Means by which you or a third-party payer can verify that services billed were actually provided
- A source of information for public health officials charged with improving the health of this state and nation
- A source of data for our planning and marketing
- A tool with which we can assess and continually work to improve the care we render and outcomes we achieve

Understanding what is in your record and how your health information is used helps you to: ensure its accuracy, better understand who, what, when, where and why others may access your health information and make more informed decisions when authorizing disclosure to others.

Your Health Information Rights:

Although your health record is the physical property of this office, the information belongs to you. You have the right to:

- Obtain a paper copy of this notice of information practices upon request
- Inspect and copy your health record as provided in 45 CFR 164.524
- Amend your health record as provided in 45 CFR 164.528
- Obtain an accounting of disclosures of your health information as provided in 45 CFR 164.528
- Request communications of your health information by alternative means or at alternative locations
- Request a restriction on certain uses and disclosures of your information as provided by 45 CFR 164.522, and
- Revoke your authorization to use or disclose health information except to the extent that action has already been taken.

Our Responsibilities:

We are required to:

- Maintain the privacy of your health information
- Provide you with this notice as to our legal duties and privacy practices with respect to information we collect and maintain about you
- Abide by the terms of this notice
- Notify you if we are unable to agree to a requested restriction, and
- Accommodate reasonable requests you may have to communicate health information by alternative means or alternative locations.

We reserve the right to change our practices and to make the new provisions effective for all protected health information we maintain. Should our information practices change, we will post a new notice in the office where it can be seen. We will not use or disclose your health information without your authorization except as described in this notice. We will also discontinue to use or disclose your health information after we have received written revocation of the authorization according to the procedures included in the authorization.

For More Information or to Report a Problem:

If you have questions and would like additional information you may contact the practice's Privacy Officer at (254) 772-6760. If you believe your privacy rights have been violated, you can file a complaint with our Privacy Officer, Nancy Potts, or with the Office for Civil Rights, U.S. Department of Health and Human Services. There will be no retaliation for filing a complaint with either the Privacy Officer of the Office for Civil Rights.

U.S. Dept. of Health and Human Services
HIPAA Complaint
7500 Security Blvd.
C5-24-04
Baltimore, MD 21244

Examples of Disclosures for Treatment, Payment and Health Operations:

We will use your health information for treatment.

For example: Information obtained by a nurse, physician, or other member of your healthcare team will be recorded in your record and used to determine the course of treatment that should work best for you. Your physician will document in your record his or her expectations of the members of your healthcare team, record the actions they took and their observations. In that way, the physicians will know how you are responding to treatment.

We will also provide your physician or subsequent healthcare provider with copies of various reports that should assist him or her in treating you once you are discharged from the hospital or our office.

We will use your health information for payment.

For example: A bill may be sent to you or a third party payer. This information accompanying the bill may include information that identifies you, as well as your diagnosis, procedures, and supplies used.