

Contact Preferences and Privacy Policy

In general, the HIPAA (Health Insurance Portability and Accountability Act) privacy rule gives individuals the right to request a restriction on uses and disclosures of their protected health information (PHI). The individual is also provided the right to request confidential communications or that a communication of PHI be made by alternative means, such as sending correspondence to the individual's office instead of the individual's home.

The Privacy Rule generally requires healthcare providers to take responsible steps to limit the use or disclosure of, and requests for, PHI to the minimum necessary to accomplish the intended purpose. These provisions do not apply to uses or disclosures made pursuant to an authorization requested by the individual. Healthcare entities must keep records of PHI disclosures. Information provided above, if completed properly, will constitute an adequate record. More information about HIPPA is available on the internet (www.hhs.gov/ocr/hipaa/). Note: Uses and disclosures for TPO (treatment, payment, or health-care operations) may be permitted without prior consent in an emergency.

I wish to be contacted in the following manner (check all that apply):

Home Telephone _____

_____ OK to leave message with detailed information

_____ Leave message with callback number only

Mobile Telephone _____

_____ OK to leave message with detailed information

_____ Leave message with call-back number only

Written Communication

_____ OK to mail to my home address

_____ OK to mail to my work/office address

_____ OK to fax to this number _____

Work Telephone _____

_____ OK to leave message with detailed information

_____ Leave message with callback number only

E-Mail Address _____

_____ OK to e-mail information

Patient Signature

Print Name

Date

Note of Privacy Practices

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.

By law, Medicare is required to protect the privacy of your personal medical information. Medicare is also required to give you this notice to tell you how Medicare may use and give out ('disclose') your personal medical information held by Medicare.

Medicare must use and give out your personal medical information to provide information:

- To you or someone who has the legal right to act for you (your personal representative),
- To the Secretary of the Department of Health and Human Services, if necessary, to make sure your privacy is protected, and
- Where required by law.

Medicare has the right to use and give out your personal medical information to pay for your health care and to operate the Medicare program. For example:

- Medicare Carriers use your personal medical information to pay or deny your claims, to collect your premiums, to share your benefit payment with your other insurer(s), or to prepare your Medicare Summary Notice.
- Medicare may use your personal medical information to make sure you and other Medicare beneficiaries get quality healthcare, to provide customer services to you, to resolve any complaints you have, or to contact you about research studies.

Medicare may use or give out your personal medical information for the following purposes under limited circumstances:

- To State and other Federal agencies that have the legal right to receive Medicare data (such as to make sure Medicare is making proper payments and to assist Federal/State Medicaid programs),
- For public health activities (such as reporting disease outbreaks),
- For government health care oversight activities (such as fraud and abuse investigations),
- For judicial and administrative proceedings (such as in response to a court order),
- For law enforcement purposes (such as providing limited information to locate a missing person),
- For research studies that meet all privacy law requirements (such as research related to the prevention of disease or disability),
- To avoid a serious and imminent threat to health or safety,
- To contact you about new or changed benefits under Medicare, and
- To create a collection of information that can no longer be traced back to you.

By law, Medicare must have your written permission (an 'authorization') to use or give out your personal medical information for any purpose that isn't set out in this notice. You may take back

(‘revoke’) your written permission at any time, except if Medicare has already acted based on your permission.

By law, you have the right to:

- See and get a copy of your personal medical information held by Medicare.
- Have your personal medical information amended if you believe that it is wrong or if information is missing, and Medicare agrees. If Medicare disagrees, you may have a statement of your disagreement added to your personal medical information.
- See and get a copy of your personal medical information held by Medicare.
- Have your personal medical information amended if you believe that it is wrong or if information is missing, and Medicare agrees. If Medicare disagrees, you may have a statement of your disagreement added to your personal medical information.
- Ask Medicare to limit how your personal medical information is used and given out to pay your claims and run the Medicare program. Please note that Medicare may not be able to agree to your request.
- Get a listing of those getting your personal medical information from Medicare. The listing won’t cover your personal medical information that was given to you or your personal representative, that was given out to pay for your health care or for Medicare operations, or that was given out for law enforcement purposes.
- Ask Medicare to communicate with you in a different manner or at a different place (for example, by sending materials to a P.O. Box instead of your home address).
- Get a separate paper copy of this notice.

Look on the Internet (www.hhs.gov/ocr/hipaa/).

For Medicare Privacy Practices (HIPAA) FAQs for more information on:

- Exercising your rights set out in this notice.
- Filing a complaint, if you believe the Original Medicare Plan has violated these privacy rights.
- Filing a complaint won’t affect your benefits under Medicare.

You can also call 1-800-MEDICARE (1-800-633-4227) to get this information. Ask to speak to a Customer Service Representative about Medicare’s privacy notice. TTY users should call 1-877-486-2048.

You may file a complaint with the Secretary of the Department of Health and Human Services. Visit www.hhs.gov/ocr/hipaa or contact the Office for Civil Rights at 1-866-627-7748. TTY users should call 1-800-537-7697.

By law, Medicare is required to follow the terms in this privacy notice. Medicare has the right to change the way your personal medical information is used and given out. If Medicare makes any changes to the way your personal medical information is used and given out, you will get a new notice by mail within 60 days of the change.

The Notice of Privacy Practices for the Original Medicare Plan became effective April 14, 2003.

How to Get Personal Information Over the Phone: <http://www.medicare.gov/benechart.asp>