

Your Access to Medical Information

RIGHT TO INSPECT AND COPY

You have the right to inspect and copy medical information that may be used to make decisions about your care. Usually this includes medical and billing records, but does not include psychotherapy notes, information compiled for use in a civil, criminal, or any administrative action or proceeding (i.e. workers compensation cases) as well as protected health information to which access is prohibited by law. To inspect and copy medical information that may be used to make decisions about you, you must submit your request in writing. If you request a copy of the information, you will be charged a fee for the costs of copying, mailing, or other supplies associated with your request. We may deny your request to inspect and copy in certain limited circumstances. If you are denied access to medical information, you may request that the denial be reviewed. Another licensed health care professional chosen by this practice will review your request and the denial. The person conducting the review will not be the person who denied your request. We will comply with the outcome of the review.

RIGHT TO ANOTHER COPY OF THIS NOTICE

You have the right to a paper copy of the complete Notice of Privacy Practices Policy at any time.

RIGHT TO REQUEST CONFIDENTIAL COMMUNICATIONS

You have the right to request how you wish to receive communications about medical matters. To request confidential communications, you must make your request in writing. We will not ask you the reason and we will accommodate all reasonable requests. Your request must specify how or where you wish to be contacted, however, please be advised that we reserve the right to deny a request if it poses an unreasonable burden on the practice.

WHO WILL FOLLOW THIS NOTICE

Any health care professional authorized to enter information into your medical record, all employees, staff and other personnel at this practice who may need access to your information, must abide by this Notice. All subsidiaries, business associates (i.e. billing services), sites and locations of Mahwah Valley Orthopaedic Associates may share medical information with each other for treatment or payment purposes. Except where treatment is involved, only the minimum necessary information needed to accomplish any other task will be shared.



MAHWAH VALLEY ORTHOPAEDIC ASSOCIATES

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MAHWAH VALLEY ORTHOPAEDIC ASSOCIATES

Notice 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 this information carefully.

**OUR PROMISE TO YOU
OUR PATIENTS:**
Your information is confidential.

Our Code of Ethics requires that your information be held in strict confidence

INTRODUCTION

We maintain protocols to ensure the security and confidentiality of your personal information. We have physical security in our building, passwords to protect databases, compliance audits and virus /intrusion detection software.

Within our practice, access to your information is limited to those who need to perform their jobs.

At MVOA, we are committed to treating and using your protected health information responsibly.

This Notice of Privacy Policies describes the personal information we collect, as well as how 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

Each time your visit our practice, a record of your visit is made. Typically this record contains your symptoms, examination and test results, diagnoses, treatment and a plan for future care or treatment. This information, referred to as your health or medical record, serves as a:

- Basis for planning your care and treatment
- Means for communication among the many health professionals who contribute to your care
- Legal document describing the care your received
- Means by which you or a third party payer can verify that services billed were actually provided
- Tool in educating health professionals
- Source of data for medical research
- Source of information for public health officials charged to improve the health of the state and nation
- Source of data for our planning and marketing
- Tool by 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 our practice, the information belongs to you. You have the right to:

- Obtain a paper copy of this notice of privacy policies upon request
- Inspect and request a copy of your health record as provided by CFR 164.524
- Request in writing that an amendment be made to your record as provided by CFR 164.526
- Obtain an accounting of disclosures of your health information as provided by CFR 164.528
- Request confidential communications of your health information as provided by CFR 164.522
- Request a restriction on certain uses and disclosures of your information as provided by CFR 164.522. However, our practice is not required by law to agree to a requested restriction.

Our Responsibilities

Mahwah Valley Orthopaedic Associates is 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
- Accomodate reasonable requests you may have to communicate your health information

We reserve the right to change our practices and to make the new provisions effective for all protected health information we maintain. We will keep posted a copy of the most current notice in our facility containing the effective date in the top right hand corner. In addition, each time you visit our facility, you may obtain a copy of the current notice in effect.

We will not use or disclose your health information in a manner other than described in the section regarding Examples of Disclosures for Treatment, Payment, and Health Operations without your written authorization, which you may revoke as provided by 45 CFR 164.508(b)(5), except to the extent that action has already been taken.

For More Information or To Report a Problem

If you have questions or would like additional information, please call (201) 818-4344 and ask to speak to our Privacy Officer

If you believe that your privacy rights have been violated, you can either file a complaint with our Privacy Officer, or with the Office for Civil Rights, U.S. Dept. of Health and Human Services (OCR). There will be no retaliation for filing a complaint with either our Privacy Officer or the OCR.

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 health care 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 health care team. Members of your health care team will then record the actions they took and their observations. In that ways the physician will know how you are responding to treatment.

We will also provide your other physician(s) or subsequent health care provider(s) (when applicable) with copies of various reports that should assist them in treating you.

We will use your health information for payment

For Example:

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

Other uses and disclosures of medical information not covered by this Notice or the laws that apply to us will be made only with written authorization. You may revoke that authorization in writing, however we will be unable to take back any disclosures we have already made with your authorization, and we are required by law to retain our records of the care we have provided you

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