

# Notice of Privacy Practices

Effective: September 23, 2013

Version: 20130923

**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**

*Please note: This brochure is prepared and provided to you in accordance with 45 CFR §164.520, a federal regulation.*

## **Rights, Obligations, Requests, and Complaints**

### **Your Health Information Rights**

Note: Exercising these rights requires a **written notice** or form which may be obtained from TriValley Primary Care. Send your request, to our Privacy Officer at the address listed at the end of this Notice, except as noted below.

You have the right to:

- request a specific restriction on certain uses and disclosures of your information as provided by 45 CFR §164.522; however, TriValley Primary Care is not required to agree to a requested restriction, except for services paid for in full by you, that is, no insurance submission, which shall not be disclosed to a health plan for purposes of payment or health care operations;
- revoke your authorization to use or disclose health information except to the extent that action has already been taken;
- inspect and obtain a copy of your health record as provided for in 45 CFR §164.524 (may be submitted to your TriValley office. State mandated fees will be assessed, with certain exceptions);
- request that an electronic copy of your record (to the extent your information is in an electronic format) be given to you or transmitted to another individual or entity in a form or format you request, but may be provided you on paper if the form or format cannot be accommodated (may be submitted to your TriValley office. Reasonable labor costs may be assessed, and supplies and postage if applicable);
- refuse a summary of the Protected Health Information in your record as an alternative to the entire record (inform your TriValley office);
- request an explanation of the Protected Health Information provided to you if you pay the associated fees, excluding any cost for search or retrieval (inform your TriValley office);
- request an amendment to your health record as provided in 45 CFR §164.526 (must state your reason in writing, but TriValley Primary Care may not honor in under cases);
- request communications of your health information by alternative means or at alternative locations (inform your TriValley office). All reasonable request will be honored);
- be notified upon a breach of any of your unsecured Protected Health Information by 45 CFR §164.410;
- receive an accounting of disclosures made of your health information as provided by 45 CFR §164.528 (fees may be assessed for requests more frequent than every 12 months); and
- obtain a paper copy of the notice of information practices (Notice of Privacy Practices) upon a written or verbal request to your TriValley office.

### **Complaints**

You may complain within 180 days of when you knew or should have known of the suspected violation to TriValley Primary Care and to the U. S. Department of Health and Human Services if you believe your privacy rights have been violated. You will not be retaliated against for filing a complaint.

## **Obligations of TriValley Primary Care**

TriValley Primary Care is required to:

- maintain the privacy of Protected Health Information (PHI), a term defined in a federal law, Health Insurance Portability and Accountability Act of 1996, commonly called “HIPAA”;
- provide you with this notice of its legal duties and privacy practices with respect to your health information;
- abide by the terms of this notice;
- notify you if we are unable to agree to a requested restriction on how your information is used or disclosed;
- accommodate reasonable requests you may make to communicate health information by alternative means or at alternative locations; and
- obtain your written authorization to use or disclose your health information for reasons other than those listed below and permitted under law.

## **How TriValley Primary Care May Use or Disclose Your Health Information**

### GENERAL STATEMENT

TriValley Primary Care uses health information about you for treatment, to obtain payment for treatment, for administrative purposes, to evaluate the quality of care that you receive, and for other lawful purposes.

Your health information is contained in an electronic or tangible (paper) medical record that is the property of TriValley Primary Care.

*For Treatment.* TriValley Primary Care may use your health information to provide you with medical treatment or services. For example, a health care provider, such as a physician, nurse, or other person providing health services to you, will obtain information from you related to your medical complaint or treatment you seek and record it in your medical record. This information is necessary for health care providers to determine what treatment you should receive. Health care providers will also record actions taken by them in the course of your treatment and note how you respond to those actions. Also, by law, this information may be shared with other providers of your care.

*For Payment.* TriValley Primary Care may use and disclose your health information to others for purposes of receiving payment for treatment and services that you receive. For example, a bill may be sent to you or a third-party payor, such as an insurance company or health plan, or a collection agency, as necessary. The information on the bill may contain information that identifies you, your diagnosis, and treatment or supplies used in the course of treatment.

*For Health Care Operations.* TriValley Primary Care may use and disclose health information about you for operational purposes. For example, your health information may be disclosed to members of the medical staff, risk or quality improvement personnel, and others to:

- evaluate the performance of our staff;
- assess the quality of care and outcomes in your cases and similar cases;
- learn how to improve our facilities and services;
- train medical students and other health care workers;
- resolve grievances brought by you or your representative; and,
- determine how to continually improve the quality and effectiveness of the health care we provide.

*Minors.* We may disclose the Protected Health Information of minor children to their parents or guardians unless such disclosure is otherwise prohibited by law.

*Reminders and Information.* TriValley Primary Care may use your information to provide you with appointment reminders by telephone leaving such information on your answering machine or via your private account on the Patient Portal; or information about treatment alternatives or other health-related benefits and services that may be of interest to you.

*Required by Law.* TriValley Primary Care may use and disclose information about you as required by law. For example, TriValley Primary Care may disclose information for the following purposes:

- for judicial and administrative proceedings pursuant to legal authority;
- to report information related to victims of abuse, neglect or domestic violence;
- to provide required notices of unauthorized access to or disclosure of your health information; and
- to assist law enforcement officials in their law enforcement duties.

*Public Health.* Your health information may be used or disclosed for public health activities such as assisting public health authorities or other legal authorities to prevent or control disease, injury, or disability, or for other health oversight activities. Correspondents might include the federal Food and Drug Administration or the federal Centers for Disease Control and Prevention, and similar agencies and officials in the Commonwealth and locally.

*Decedents.* Health Information may be disclosed to funeral directors, coroners or medical examiners to enable them to carry out their lawful duties.

*Organ/Tissue Donation.* Your health information may be used or disclosed for cadaveric organ, eye or tissue donation purposes.

*Research.* TriValley Primary Care may use your health information for research purposes when an institutional review board or privacy board that has reviewed the research proposal and established protocols to ensure the privacy of your health information has approved the research. Even without that special approval, we may permit researchers to look at Protected Health Information to help them prepare for research, for example, to allow them to identify patients who may be included in their research project, as long as they do not remove, or take a copy of, any Protected Health Information. We may use and disclose a limited data set that does not contain specific readily identifiable information about you for research. However, we will only disclose the limited data set if we enter into a data use agreement with the recipient who must agree to (1) use the data set only for the purposes for which it was provided, (2) ensure the confidentiality and security of the data, and (3) not identify the information or use it to contact any individual.

*Health and Safety.* Your health information may be disclosed to avert a serious threat to the health or safety of you or any other person pursuant to applicable law.

*Government Functions.* Your health information may be disclosed for specialized government functions such as protection of public officials or reporting to various branches of the armed services. Examples include audits, investigations, inspections, licensure, and similar activities that are necessary for the government to monitor the health care system, government programs, and compliance with civil rights laws

*Workers Compensation.* Your health information may be used or disclosed in order to comply with laws and regulations related to Workers Compensation.

*Business Associates.* We may disclose Protected Health Information to our business associates who perform functions on our behalf or provide us with services if the Protected Health Information is necessary for those functions or services. For example, we may use a company to process medical billing claims, or to provide computer networking or consulting services for us. All of our business associates are obligated, under contract with us, to protect the privacy and ensure the security of your Protected Health Information.

*Fund Raising. See Other Uses and Strictures, below.*

*Other Uses and Strictures.* Other uses and disclosures will be made only with your written authorization. The following require separate authorization by law:

- Most uses and disclosures of psychotherapy notes (if received from other providers);
- Uses and disclosures of Protected Health Information for marketing purposes;
- Disclosures that constitute a sale of your Protected Health Information; and
- HIV information, Alcohol and Substance Abuse information, Mental Health Information as provided in Commonwealth laws.

Notice: TriValley Primary Care renounces its right as provided by law to use your information to contact you to raise funds for TriValley Primary Care. There is no need for you to opt out of receiving such communications.

### **Important Notes**

TriValley Primary Care reserves the right to change its information practices and to make the new provisions effective for all protected health information it maintains, even if this information had been created or received prior to the change. Revised notices will be made available to you by posting such notices in each office, and on our website: [www.trivalleypc.com](http://www.trivalleypc.com).

This notice is not intended to create contractual or other rights independent of those created in the federal regulations governing the privacy rule.

### **Contact Information**

If you have any questions or complaints, please contact in writing:

TriValley Primary Care  
Corporate Office  
Attn: Privacy Officer  
519 South Fifth Street, Suite 130  
Perkasie, PA 18944-1042

Email: [info@trivalleypc.com](mailto:info@trivalleypc.com)

Here is the means to make a [complaint at the federal level](#):

Region III, Office for Civil Rights, U.S. Department of Health and Human Services, 150 S. Independence Mall West, Suite 372, Public Ledger Building, Philadelphia, PA 19106-9111. Main Line (215) 861-4441. Hotline (800) 368-1019. FAX (215) 861-4431. TDD (800) 537-7697.

**This Notice supersedes Version 20030411, dated April 11, 2003.**

Source: Federal Register: March 20, 2003 (Vol. 68, No. 54) and January 25, 2013 (Vol. 78, No. 17).