

## **Notice of Privacy Practice**

Dr. Fu appreciates your trust. Our office is committed to protecting your private, personal information. A law requires that we inform you of how we collect and use your personal information.

**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.**

### **Understand Your Health Information**

Every time you visit a hospital, physician or other healthcare provider, personal information is collected about you and a record of your visit is created. This information can be collected from:

- What you write on your registration forms or medical history forms (such as your name, address and Social Security number, or information about your health),
- Your insurance company, claims manager, or employer (such as your benefits or claim status, information about your injury, or information about your job duties),
- Your interactions with our medical staff or our partners (such as your medical history, what was found when you were examined, or lab results), and
- Information sent to us by other healthcare providers who have treated you in the past (such as surgery reports or records from a previous hospitalization).

Typically, your record contains information identifying you as an individual as well as information about your symptoms, examination and test results, diagnosis and treatment. Your billing record is also considered part of your personal health information. This information, often referred to as your health or medical record, serves as:

- A tool to plan your care and treatment,
- A way to communicate with other health professionals who contribute to your care,
- A legal document describing the care you received,
- A way for you or your insurance company to be sure the services we billed for were actually provided,
- A source of information public health officials need to improve the health of the nation,
- A way for our staff to improve the care we give to our patients, and
- A tool our company can use to plan future growth and future staff scheduling.

### **Your Health Information Rights**

Although the health and billing records we create are the property of our office, the information in your records belongs to you. You have the right to:

- Inspect and obtain a copy of your health and billing record,
- Ask us to amend incorrect information in your record
- Ask us to restrict certain uses and disclosures of your information,
- Obtain a list of everyone to whom we have disclosed your information,

- Ask us to contact you at a specific number or location to protect confidentiality, and,
- Obtain a paper copy of this Notice of Privacy Practices upon request even if you have received it electronically.

### **Our Responsibilities**

Pauline Fu, DPM is required by law to:

- Maintain the privacy of your health information,
- Provide you this notice, which describes the way we use and share your health information and,
- Abide by the terms of this notice.

We reserve the right to make changes to our privacy practices at any time, and such changes will be effective for any health information we already maintain. Should our privacy practice change, a revised notice will be posted in our facility and on our website. You may also request a copy of our current notice and at any time.

### **Examples of Disclosure for Treatment, Payment and Operations**

- For treatment:
  - Your provider may need to consult with someone regarding your care, and information about you would be shared with that person. Examples of people your provider might consult which include your referring physician, a specialist such as a cardiologist or a radiologist, a pharmacist, or your vocational counselor.
  - Sometimes we use others outside our company to help us provide treatment to you. Examples for these outside companies include an interpreter service, a lab used for blood work or drug testing, or a company that makes a custom brace or orthotic for you.
  - If you have a family member who needs specific information about you in order to assist in your care, we will share information with that family member as long as you do no object.
- For Payment:
  - A bill or statement may be sent to you or to an insurance company. In addition to information that identifies you, the bill could contain your diagnosis, procedures performed, and supplies used. This information is given to your insurance plan so they will pay for your treatment.
  - We may also send information to your attorney or claims manager when you have authorized us to do so.
  - Information from exams or testing paid for you by your employer any be sent to your employer.
- For Operations:
  - We routinely review medical records to monitor and improve the services we provide to you. Medical records also may be used to review the qualifications and performance of our healthcare providers and to train our staff.

- Our company has partnerships with other companies for special services. These partners include the copy service that assists us in preparing a copy of your medical record to send to someone you have authorized, and a company who operates our computer services and the electronic billing services.
- Additional Uses of Your Information:
  - We may contact you to remind you about your appointment or to give you information about other health-related services.
  - We may use and disclose your information for medical quality review administered by your health plan or for accounting, risk management or compliance audits, Some of these services may be performed by people outside our own company.

### **Disclosing Your Health Information**

We will not use or disclose your health information except as allowed by law or with your specific written authorization. You can revoke any authorization you give us. There are some situations where we are allowed or required by law to disclose your health information without a signed authorization. These are:

- For public health purposes such as reporting communicable diseases, work-related illnesses, or other diseases and injuries permitted by law; reporting births and deaths; and reporting reactions to drugs and problems with medical devices;
- To protect victims of abuse, neglect or domestic violence;
- For health oversight activities such as investigations, audits and inspections;
- For lawsuits and similar proceedings;
- When requested by law enforcement as required by law or court order;
- To coroners, medical examiners and funeral directors;
- For organ and tissue donation'
- To reduce or prevent a serious threat to public health and safety;
- For worker's compensation or other similar programs if you are injured at work; and
- For specialized government functions such as intelligence and national security.

### **For More Information or to Report a Problem**

If you have questions, or if you would like additional information about our Notice of Information Practice, you may contact our Privacy Officer at:

Pauline Fu, DPM  
280 Madison Ave  
Rm 202  
New York, NY 10016

If you believe your privacy rights have been violated, you have the right to complain us at the above address or to the Secretary of Health and Human Services. You will not be penalized, retaliated against, or otherwise treated differently for filing a complaint.

**Effective Date:** The Notice of Privacy Practices takes effect on November 15, 2013