



COMPASS PHYSICAL THERAPY PRIVACY POLICY

Our Commitment to Your Privacy: We are dedicated to maintaining the privacy of your medical information. In conducting business, we will create records regarding you and the treatment/ services we provide to you. We are required by law and our own procedures to maintain the confidentiality of your health information, provide you with notice of our legal duties, and follow the terms of our “Privacy Policy” currently in effect.

What is HIPAA? HIPAA is a law passed by Congress in 1996 to improve the efficiency and effectiveness of the healthcare system. It requires health care professionals to adhere to privacy and security standards in order to protect their patient’s Personal Health Information (PHI). PHI is confidential information about a patient, including demographics.

How will Compass Physical Therapy Use PHI under HIPAA? HIPAA allows us to use and disclose your PHI for the purposes of *Treatment, Payment and Healthcare Operations*. We will specifically use and disclose your PHI to communicate with your physician and to, upon request, assist your insurance company with the processing of your claims. Your authorization is not required for Use and Disclosure of PHI for the purposes of Treatment, Payment and Healthcare Operations.

- *Treatment:* We may use your PHI to provide you with health care treatment and/or services. We may share you PHI with doctors, nurses, health care students, or other personnel who are involved in your care in order to assist with your treatment.
- *Payment:* We may use and disclose PHI to help us or another provider obtain payment for the health care services provided so your health plan will pay us or reimburse you for the service.
- *Health Care Operations:* We may use your PHI to support our business practice activities and improve the quality and cost of care including review of treatments/services provided and staff performance evaluations. We may contact you at the address/email / phone numbers you provide including voicemail messages regarding appointment scheduling/cancellations, insurance updates, and billing/payment matters.

Disclosure to those Involved in the Individual’s Care: When necessary, we will make a professional decision to disclose PHI to family members, close friends or other persons involved in your care when you approve or when are not able or present to approve.

Uses and Disclosures Required by Law: As required by law we are obligated to use and disclose PHI for the following reasons:

- *Public Health Activities:* Examples include: communicable diseases, STD’s, lead poisoning, Reyes Syndrome, etc., to public health officials.
- *Victims of Abuse, Neglect, or Domestic Violence:* Examples include: child abuse and neglect; an abused or neglected nursing home resident; a patient over 60 years old involved in elder abuse.
- *Health Oversight Activities:* We may use and release PHI to be used for audits, investigations, licensure issues, etc.
- *Judicial and Administrative Proceedings:* PHI may be disclosed to the appropriate authorities as a result of a court order subpoena, discovery request, etc.
- *Law Enforcement Purposes:* We may disclose reasonably necessary PHI to law enforcement officials to identify or locate a suspect, fugitive, material witness or missing person.
- *Related to Decedents:* We may use and disclose PHI to a coroner or medical examiner and funeral directors as required by law.



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- *Cadaveric Organ, Eye or Tissue Donations:* We may use and release PHI in order to facilitate organ, eye or tissue donations.
- *Avert a Serious Threat to Health or Safety:* We may use and release PHI to public health and other authorities required by law in order to prevent a serious threat to your health or safety.
- *Specialized Government Functions:* We may use and release PHI for military/veterans and national security/intelligence activities.
- *Emergency Situations:* In the event of an eminent threat to the safety of a patient, we may disclose PHI to prevent or lessen the threat.
- *Marketing Purposes:* Compass Physical Therapy will notify you of new services and facilities unless you specify otherwise. We will NOT disclose your PHI for marketing purposes without your prior written authorization.
- *Research Purposes:* We do not use or disclose identifiable PHI for research purposes, unless you provide written authorization.
- *Disclosures Requiring the Patients Authorization -* We must obtain your written authorization prior to disclosing your PHI for reasons other than treatment, payment and health care operations. You may revoke your authorization any time.

What are my rights under HIPAA? Under HIPAA you have a right to request the following as long as a request is made in writing to the attention of the Privacy Officer and applicable fees are paid. There is a possibility that your request may be denied. If your request is denied we will explain why it was denied in writing.

- *Right to Inspect:* You have a right to inspect and obtain a copy of your PHI. We will respond to your request within 30 days.
- *Right to Amend PHI:* If you feel that your PHI is inaccurate or incomplete, you may request an amendment to your PHI. We will respond to your request within 60 days. If we honor your request we will amend your PHI and notify you and applicable parties. We will deny your request if we determine your PHI to be correct or complete, if the change requested pertains to documentation that was not created by us, or if PHI is not available for inspection.
- *Right to Accounting of Disclosures:* You have the right to know what disclosure(s) of your PHI have been made. You have a right to request a listing of who your PHI was sent to, when it was sent, what content of your PHI was sent and for what purpose. We will respond to your request within 60 days. There will be no charge to you for an initial request. Additionally, your request may not include disclosures made for national security reasons or to law enforcement officials/correctional facilities.
- *Right to Request Confidential Communications of PHI:* We will honor all reasonable requests to keep communications confidential. A reasonable request is one that specifies an alternative address, means of contact and information on how payment will be made.
- *Right to Request Restricted Use of PHI:* Your request must state specific restrictions requested and to whom the restrictions would apply, however we are not required to agree to your request.
- *Right to Receive a Hard Copy of this Notice:* This notice can also be accessed on our website: www.CompassptNC.com

Where can I file a privacy complaint? If you feel your privacy rights have been violated, you may file a complaint in writing with Compass Physical Therapy's Compliance Officer, at 2170 Hendersonville Road, Arden, NC 28704. You may also file a complaint with the Secretary of the US Department of Health and Human Services in Washington D.C. in writing within 180 days of a violation of your rights. There will be no retaliation for filing a complaint.