

Effective Date: April 14, 2003

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU OR YOUR CHILD MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION.

PLEASE REVIEW CAREFULLY.

YOUR PRIVATE HEALTH INFORMATION (PHI)

Each time you have contact with a healthcare provider for delivery of healthcare, a record of your contact/visit is prepared. This record, maintained in written, oral or electronic format, contains presenting signs/symptoms, results of examination and tests, diagnoses, treatment and future care. Your medical record is the physical property of **Kaplan Pediatrics and Associates**, but you have certain rights to restrict some of the uses or disclosures of the information contained in your medical record in the process of providing treatment, receiving payment and performing other regular healthcare operations such as:

- Documenting and describing the care you received for legal purposes
- Communicating with other healthcare providers who maybe involved in your care.
- Educating healthcare professionals
- Medical research
- Providing information for government and public health entities responsible for improving public health and welfare
- Evaluating and improving the care you receive and the outcomes achieved
- Billing and verification of services provided to you
- Conducting other routine healthcare operations such as quality improvement studies and assessing healthcare provider competence

Protecting your privacy and maintaining the security of your health information is one of the most important responsibilities of Kaplan Pediatrics and Associates. We are required by law to maintain privacy and confidentiality of your health information, provide you with this *Notice of Privacy Practices*, notify you of your rights to restrict use of this information, notify you if Kaplan Pediatrics and Associates is unable to agree to a requested restriction, and allow you to review the *Notice of Privacy Practices* prior to granting consent and notifying you of changes/revisions to this *Notice*.

EXAMPLES OF DISCLOSURE OF YOUR PHI

- **Healthcare delivery and treatment:**
Information obtained from you by a physician, nurse or other healthcare professional is documented in your record and used for the assessment, evaluation, diagnosis and treatment of your medical conditions(s). This information is provided to other healthcare professionals, such as other physicians, specialists, physical therapists, hospital based providers and/or other healthcare providers following your treatment by Kaplan Pediatrics and Associates.
- **Billing and payment:**
Your PHI is utilized to justify the level of care delivered to you and the charges incurred for the services. This information generally accompanies the bill and is sent to our payers and other third party administrators.
- **Other healthcare operations:**