



## **NOTICE OF PRIVACY PRACTICES FOR PROTECTED HEALTH INFORMATION**

### **The Federal Government sets rules and limits on who can view and receive your Information**

#### ***Your information can be used and shared...***

- For your treatment and care coordination.
- To pay the provider for your healthcare and help run their businesses.
- Using our best judgment, with your family, relatives and friends or others you identify who are involved with your healthcare or your health bills, unless you object.
- To protect the public's health (for the purpose of controlling disease, injury or outbreak, etc.).
- To make required reports to the police. For example, if we have reason to believe you are a possible victim of abuse, neglect, domestic violence or other crimes.
- To assist in disaster relief.
- With agencies for health oversight activities including audits, civil, administrative or criminal investigations, inspections, etc.
- Other uses and disclosures besides those identified in this notice will be made only as authorized by law or with your written authorization.

### **The Federal Government protects the Privacy of your Health Information**

#### ***Providers required to follow this law must keep your information private by...***

- Teaching the people who work for them how your information may not be used and shared and by taking steps to keep your health information secure.

### **The Federal Government gives you rights over your Health Information**

#### ***Providers and health insurers required to follow this law must comply with your right to...***

- Ask to see and obtain a copy of your health records.
  - The health and billing records we maintain are the physical property of Positively Chiropractic.
  - You may incur a fee if your request includes copies and mailing.
  - In most cases, your copies must be given to you within 30 days, but this can be extended for another 30 days if you are given a reason.
- Have corrections added to your health information.
  - The office or healthcare provider is not required to make any of the corrections requested.
  - Your request must be in writing and it must explain why the information should be amended.
- Receive a notice that tells you how your health information may be used or shared.
  - You may also request a paper copy of the Notice of Privacy Practices for Protected Health information by simply asking the office staff.
- Decide if you want to give permission before your health information can be used or shared for certain purposes, such as marketing.
- Obtain a report on when and why your health information was shared for certain purposes.

#### ***If you believe your rights are being denied or your Health Information isn't being protected, you can file a written complaint with your healthcare provider or directly with the US Government.***

We cannot and will not require you to waive your right to file a complaint with the Secretary of Health and Human Services (HHS) as a condition of receiving treatment from this office. We cannot and will not retaliate against you for filing a complaint with the HHS. For more information about your rights, go to [www.hhs.gov/orc/hipaa/](http://www.hhs.gov/orc/hipaa/).

To obtain a copy of this Notice of Privacy Practices simply ask our front office staff. If you have questions or want to report a problem regarding the handling of your information you may contact us at 703-642-8685 or by mail at 5105-A Backlick Road, Annandale, VA 22003.