

HIPAA NOTICE OF PRIVACY PRACTICES

Chinese Acupuncture Center at Princeton | 330 North Harrison St. Suite 5, Princeton, NJ 08540 | Phone: 609-683-9599 | www.chineseacupunctureprinceton.com

This notice explains how your medical information may be used, disclosed, and your access to this information.

Please review it carefully before your first visit.

Under the **Health Insurance Portability and Accountability Act (HIPAA)** of July 1, 1997, it is our legal duty to make sure your protected health information (PHI) is safe.

Our office respects your right to privacy. Information regarding your therapy is strictly confidential and is only used to communicate with your doctor, case worker and claims representative for payment or for pre-authorization. Should any other official party request information about you, we would need to see a signed authorization request to release information. All other uses of this protected health information will be made only with your authorization which you have the right to revoke at any time. If a claim is unpaid due to the unavailability of the requested information, you will be responsible for payment to us.

Evaluation reports, treatment plans and copies of prescriptions for the therapy and progress notes are sometimes mailed to the insurer (case worker) to carry out treatment and receive payment for our services. In settlement cases, your attorney can request copies of your file with a written request from you. A subpoena would be issued by the other party's attorney. A subpoena is a legal demand for information which we must comply.

Marketing:

The Chinese Acupuncture Center at Princeton will not use or disclose your PHI for marketing communication without your written authorization. This office may send birthday cards, thank you cards, newsletters, email, notice of events and/or appointment reminders to you.

Disclosure:

The Chinese Acupuncture Center at Princeton may use or disclose your PHI without your consent or authorization when required by law.

Patient Rights of Privacy Policy:

- A patient may request restrictions on certain uses and disclosure of protected information.
- You have the right to receive confidential communication of protected health information
- You have the right to inspect and request a copy of protected health information and medical records.
- You have the right to an accounting of disclosures of protected health information.
- You have to amend protected information (there is an appeal process).

The Chinese Acupuncture Center at Princeton reserves the right to change our Privacy Policy in accordance with HIPAA and would send such notices to your last known address. This is in compliance with HIPAA following April 13, 2003 except for emergency treatment situations.

If you have any questions about this notice or any complaints about our privacy practices please contact our office.

I have read and understood my rights regarding privacy of information and when this information may be shared with others.

I acknowledge that I have received the HIPAA notice and I will ____ will not ____ take a copy with me. ____ initials

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Print Name: _____ **Date:** _____
Patient or Authorized Person

Signature: _____
Patient or Authorized Person