

PRIVACY PRACTICES

This document describes how health and medical information about you may be used and disclosed and how you can get access to this information. Please review this carefully.

Why a Privacy Practices Policy? At Health Offerings, Inc., your individual privacy is a high priority and a principle consideration. This policy puts you, the individual, in control of how your personal health information/medical record is processed.

What is PHI:

Protected Health Information refers to information in your health record that could identify you. Your health information is what you have answered on printed intakes & at the initial consultation as well as at each subsequent visit to Health Offerings, Inc., containing dates, symptoms, exam findings, test results, diagnosis, & treatment notes/plan. We obtain this information as accurately and completely as possible, recorded by the practitioner at the time of each patient visit.

This health information is known as your medical record.

Treatment is when we provide, coordinate, or manage your health care and other services related to your health care.

Payment is when we obtain reimbursement for your healthcare.

Health Care Operations are business related activities such as audits, administrative services, case management, patient care coordination.

Use applies only to activities in Health Offerings Inc.'s office.

Disclosure applies to activities outside of Health Offerings Inc.

PHI is used:

As a tool to assess/continue treatment

Identification of an issue/problem/disease/area to be treated

Identification of a specific individual to be treated

Improves outcomes of work rendered

As the basis for care and treatment

As a means of communication from provider to provider

As a means of communication from provider to insurance company

As a legal document to record the care you received and the dates care was received.

This helps know the health information/record is accurate.

Assists the patient to make more informed decisions when authorizing disclosure to others.

As a means by which you or a 3rd party can verify services billed were actually provided.

As a tool for education of health care professionals for your care.

We protect your privacy by:

Taking reasonable precautions to protect your personal medical record/health information from loss, misuse, unauthorized use/access, disclosure, alteration, or destruction.

Information is kept only for the purposes for which it was gathered.

No credit card numbers will be stored in written file, electronically, or otherwise.

Health Offerings, Inc. Responsibilities to you:

Maintain privacy of your medical records and your PHI and your physical privacy at Health Offerings, Inc.

Provide you with notices to your legal duties and Health Offerings Inc. privacy practices with respect of the information we collect and maintain about you.

Abide by the terms of this Privacy Practices Notice.

Immediately notify you if we are unable to agree to a requested restriction.

Health Offerings, Inc. reserves the right to change our practices, make new provisions for all protected medical records and health information maintained.

We reserve the right to raise our prices with notice at any time in our calendar business year.

Should Health Offerings, Inc. information change or we move locations, we will mail notification to the designated address we have on file via US mail postcard.

We will not disclose any of your medical records/health information that Health Offerings, Inc. maintains without your written authorization.

You have the right to request your PHI by alternative means and alternative locations (ex; you may request your bill/records be sent to an alternate address).

You have the right to request an amendment of your PHI for as long as the PHI is maintained at Health Offerings Inc. We may deny your request.

You have the right to request a detail of your financial payment history at any time in writing for services performed at Health Offerings, Inc.

Uses and Disclosures Requiring Authorization:

Although your health record is the property of Health Offerings, Inc., this information belongs to you.

Health Offerings Inc. may use or disclose your PHI for purposes outside of your treatment, payment, and our health care operations when your appropriate authorization is obtained.

Authorization is written permission above and beyond the general consent that permits only specific disclosures. In the instance that Health Offerings, Inc. is asked for information for purposes outside of treatment, payment, healthcare operations, we will obtain an authorization from you in writing before releasing your PHI. We will also need written authorization before releasing your medical records.

You may revoke all such authorization at any time, provided each revocation is in writing by you.

You may not revoke any authorization to the extent that Health Offerings Inc. relied on that authorization, if the authorization was obtained as a condition of obtaining insurance coverage, and that the law provides the insurer the right to contest the claim under the policy.

Health Offerings, Inc. may use or disclose your PHI without your consent or authorization in the following scenarios:

Serious Threat to Health or Safety: If Health Offerings Inc. is engaged in professional duties and you communicate an immediate threat to cause serious bodily injury or death to an identifiable or unidentifiable individual or group of people, Health Offerings Inc. believes you have the intent and ability to carry out that threat immediately or imminently, Health Offerings Inc. must take steps to protect those third parties by warning the potential victim(s), parents/guardians of potential victim(s) if under the age of 18, and/or notifying a law enforcement officer.

Child Abuse: If Health Offerings Inc. has a reason to suspect that a child is abused or being neglected, Health Offerings Inc. is required by law to report to the Virginia Department of Social Services.

Adult/Domestic Abuse: If Health Offerings Inc. has a reason to suspect that an adult is abused, neglected, or exploited Health Offerings Inc. is required by law to immediately report to the Virginia Department of Welfare and Social Services.

Health Oversight: The Virginia Board of Medicine has the power, when necessary, to subpoena relevant records as the focus of an inquiry.

Judicial & Administrative Proceedings: If you are involved in a court proceeding and a request is made for information about your diagnosis/treatment and the PHI thereof, this PHI is privileged under VA state law, and Health Offerings Inc. will not release information without the express written authorization of you or your legal representative, or by subpoena (which you have been served/along with notice required by law).

However, IF you move to quash the subpoena, Health Offerings, Inc. is required to place your PHI in a sealed envelope and provide it to the clerk of the court of the appropriate jurisdiction so that the court can determine whether your PHI records should be released. The privilege does not apply when you are being evaluated for a third party or the evaluation is court ordered. You will be informed in advance in this case.

Worker's Compensation: If you file a worker's compensation claim, we are required by law & upon request to submit your PHI to you, your employer, the insurer, and the certified rehabilitation provider.

Serious Threat to Health of Safety: If Health Offerings, Inc. is engaged in professional duty and you communicate a specific and/or immediate threat to cause serious bodily injury or death, to an identified or unidentified person, and Health Offerings, Inc. believes you have the intent and ability to carry out that threat immediately or imminently, Health Offerings Inc. must take steps to protect third parties. These precautions may include, warning the potential victim(s), or the parent or guardian of the potential victim(s), if under 18 or notifying a law enforcement officer.

You have the right to:

Request restriction on your medical record/health information

Prohibit disclosure of your medical record/health information.

Receive confidential communication by alternate means and at alternative locations. (ex: you may request your bill to be sent to an alternate address.)

Obtain a copy of this Notice of Privacy Practices of Health Offerings, Inc. upon request.

Inspect and/or obtain a copy of your medical record upon request in writing.

Right to request an amendment of PHI for as long as the PHI is maintained in the record.

We may deny your request.

Right to obtain a paper copy of this notice from Health Offerings, Inc. even if you agreed to receive the notice electronically.

Obtain an accounting of disclosures on your medical record/health information upon request in writing.

Request a copy of your medical records for another office, upon request, in writing.

Include any family member or individual as designated to view or communicate with regarding your health information/medical record upon request in writing.

Revoke your authorization to use or disclose your medical record/health information except to the extent action has already been taken. Health Offerings, Inc. provides reasonable access to your personal information/health record upon patient request, in writing. There is a copy fee for records sent to insurance companies/lawyers offices/ 3rd parties.

If you feel Health Offerings, Inc. is in violation to this Privacy Practices Policy at any time, please contact me directly in writing at P.O. Box 8361 Richmond, VA 23235

Or you may also send a written complaint to the Secretary of the U. S. Department of Health and Human Services. You have specific rights under the Privacy Rule.

This notice will go into effect on August 2018.

We reserve the right to change the terms of this privacy notice and to make new provisions for all PHI that we maintain. We will provide you a record of this revised notice by posting this information at the office of Health Offerings, Inc. or by written notice to the address provided on file.

www.healthofferingsacupuncture.com

healthofferings@peoplepc.com

(804) 497-8860