Notice of Privacy Practices

We understand that medical information about you is personal. We are committed to protecting medical information about you. We will use your information to provide your care and treatment, create a record of the care and services you receive, bill your insurance and operate our facility in a diligent manner. We will safeguard your information and share it only with those who need or are entitled to know. We will obtain your permission for other use or disclosure.

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED

AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION.

PLEASE REVIEW IT CAREFULLY.

(Effective as of April 01, 2015)

USES AND DISCLOSURE OF HEALTH INFORMATION

TREATMENT, PAYMENTAND HEALTH CARE OPERATIONS - Hermes Healthcare PA uses and discloses your protected health information for treatment, payments and health care operations. Some examples of when our office may use or disclose your health care information for these purposes include:

* Sharing test results with other health care providers for confirmation of a diagnosis;
* Providing your diagnosis or other information about your health to your insurance provider or our billing service to obtain payment for the health care services we provide. We do use an outside billing service who follows the same privacy policies;
* Reviewing information as part of our quality improvement program.

OTHER USES AND DISCLOSURES Hermes Healthcare PA may also use or disclose your protected health information, in compliance with guidelines outlined by law, for the following purposes:

* Providing you with information related to your health;
* Contacting you regarding appointments, information about treatment alternatives, or other health related services;
* Incidental uses or disclosures (e.g., Listing your name on a sign-in sheet, etc.);
* Compliance with all laws (including reports of suspected abuse, neglect or violence);
* Providing certain specified information to law enforcement or correctional institutions;
* Providing information to a coroner, medical examiner, funeral director, or organ procurement organization;
* Public health activities when requested by a public health authority or the FDA.  Responding to health oversight agencies;
* Responding to court or administrative tribunal orders, subpoenas, discovery request or other lawful process;
* Research activities;
* When necessary to avert a serious threat to health or safety;
* Military affairs, veteran’s affairs, national security, intelligence, Department of State, or Presidential protective service activities;
* Providing information regarding your location, general condition or death to public or private disaster relief agencies; or
* Informing a family member, other relative or close friend when:
* Information is relevant to the individual's involvement with your care; o Notification of your location, general condition or death; to assist in your health-care (e.g., pick-up prescriptions or other documents, note follow-up care instructions, etc.).

AUTHORIZATIONFOR OTHER USES

Hermes Healthcare PA will make other uses and disclosure of your protected health information only after obtaining your written authorization

YOUR RIGHTS REGARDING THE PRIVACY OF YOUR HEALTH INFORMATION

Subject to limitations outlined by law, you have certain rights related to use and disclosure of your protected health information, including the right to:

* Request restrictions on certain uses and disclosures. However, Hermes Healthcare PA is not obligated to agree to requested restriction.
* Receive confidential communications of protected health information.
* Inspect and copy your protected health information with some limited exceptions;
* Amend your health information with some limited exceptions;  Receive an accounting of disclosures of your health information;  Obtain a copy of this notice.

Hermes Healthcare PA Duties Regarding the Privacy of your Health Information

Subject to limitations outlined by law, Hermes Healthcare PA has certain duties related to your protected health information, including:

* Hermes Healthcare PA is required by law to maintain the privacy of protected health information and to provide individuals with notice of our legal duties and privacy practices with respect to protected health information.
* Hermes Healthcare PA is required to abide by the terms of the privacy notice that is currently in effect.
* Hermes Healthcare PA reserves the right to change a privacy practice described in this notice and to make such change effective for all protected health information. Revised notice will be posted in our office and available upon request.

COMPLAINTS: If you believe your privacy rights have been violated, you may make a complaint by contacting our Privacy Officer, 7348 W. 21st Street, Suite 107, Wichita, KS 67205, 316-721-4828 or the Secretary for the Department of Health and Human Services 200 Independence Ave., S.W., Washington, DC 20201.

* No individual will be retaliated against for filing a complaint.

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**Your Rights Regarding Electronic Health Information Exchange**

As explained above, health care providers and health plans may use and disclose your health information without your written authorization for purposes of treatment, payment, and health care operations.  Until now, providers and health plans have exchanged this information directly by hand-delivery, mail, facsimile, or e-mail.  This process is time consuming, expensive, not secure, and often unreliable.

Electronic health information exchange, or HIE, changes this process.  New technology allows a provider or a health plan to submit a single request through a health information organization, or HIO, to obtain electronic records for a specific patient from other HIE participants.

An organization known as the Kansas Health Information Exchange, or KHIE, regulates HIOs operating in Kansas.  Only properly authorized individuals may access information through an HIO operating in Kansas, and only for purposes of treatment, payment, or health care operations.

Under Kansas law, you have the right to decide whether providers and health plans can access your health information through an HIO.  You have two choices.  First, you can permit authorized individuals to access your electronic health information through an HIO for treatment, payment, or health care operations only.  If you choose this option, you do not have to do anything.

Second, you can restrict access to all of your electronic health information through any HIO operating in Kansas with the exception of access by properly authorized individuals as needed to report specific information as required by law (for example, reporting of certain communicable diseases or suspected incidents of abuse).

If you wish to restrict access, you must complete and submit the required form to KHIE.  You must provide specific information needed to put your requested restrictions in place.  The form is available at http://www.khie.org.  You cannot request restrictions on access to certain information and permit access to all other information; your choice is to permit access to all of your information or restrict access to all of your information.

For your protection, each request is subject to verification procedures which may take several days to complete.  Your failure to provide all information on the required form may result in additional delay.

Once your request has been processed, your electronic health information no longer will be available through HIOs operating in Kansas except for mandatory reporting requirements.  You may change your mind at any time and permit access by submitting another request to KHIE.

Please understand your decision to restrict access to your electronic health information through an HIO will limit your health care providers’ ability to provide the most effective care for you.  By submitting a request for restrictions, you accept the risks associated with that decision.

If you have questions regarding electronic health information exchange or HIOs, please visit http://www.khie.org for additional information.

Your decision to restrict access to your electronic health information through an HIO does not impact other disclosures of your health information.  Providers and health plans may continue to share your information directly through other means (such as by facsimile or secure e-mail) without your specific written authorization.