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Laser, Cosmetic & Medical Dermatology
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NOTICE OF PRIVACY POLICY

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

PLEASE REVIEW CAREFULLY.

Introduction

At La Jolla Dermatology and Plastic Surgery we are committed to treating and using Protected Health Information (PHI) about you responsibly. This Notice of Health Information Practices describes the personal information we collect, and how we use or disclose that information. It also describes your rights as they relate to your protected health information. This notice is effective April 14, 2003 and applies to all protected health information as defined by federal regulations.

Understanding Your Health Record/Information

Each time you visit La Jolla Dermatology and Plastic Surgery a record of your visit is made. Typically, this record contains your symptoms, examination and test results, diagnoses, treatment, and a plan for future care or treatment. This information, often referred to as your health or medical record, serves as a:

- ❖ Basis for planning your care and treatment
- ❖ Means of communication among the many health professionals who contribute to your care
- ❖ Legal document describing the care you received
- ❖ Means by which you or a third-party payer can verify that services billed were actually provided
- ❖ A tool in educating health professionals
- ❖ A source of data for medical research.
- ❖ A source of information for public health officials charged with improving the health of this state and nation
- ❖ A source of data for our planning and marketing
- ❖ A tool with which we can assess and continually work to improve the care we render and the outcomes we achieve

Understanding what is in your record and how your health information is used helps you to: Ensure its accuracy, better understand who, what, where, and why others may access your health information, and make more informed decision when authorizing disclosure to others.

Your Health Information Rights

Although your health record is the physical property of La Jolla Dermatology and Plastic Surgery the information belongs to you. You have the right to:

- ❖ Obtain a paper copy of this notice of information practices upon request
- ❖ Inspect and copy your health record as provided for in 45 CFR 164.524
- ❖ Amend your health record as provided in 45 CFR 164.528
- ❖ Obtain an accounting of disclosure of your health information as provided in 45 CFR 164.528
- ❖ Request communications of your health information by alternative means or at alternative locations
- ❖ Request a restriction on certain uses and disclosures of your information as provided by 45 CFR 164.522
- ❖ Revoke your authorization to use or disclose health information except to the extent that action has already been taken.

Our Responsibility

La Jolla Dermatology and Plastic Surgery is required to:

- ❖ Maintain the privacy of your health information
- ❖ Provide you with this notice as to our legal duties and privacy practices with respect to information we collect and maintain about you
- ❖ Abide by the terms of this notice
- ❖ Notify you if we are unable to agree to a requested restriction
- ❖ Accommodate reasonable requests you may have to communicate health information by alternative means or alternative locations.

We reserve the right to change our practices and to make new provisions effective for all protected health information we maintain. Should our information practices change we will make a revised notice available to you.

We will use your health information for regular health operations.

For example: Members of the medical staff, the risk or quality improvement manager, or members of the quality improvement team may use information in your health record to assess the care and outcomes in your case and others like it. This information will then be

used in an effort to continually improve the quality and effectiveness of the healthcare and service we provide.

Business Associates: There are some services provided in our organization through contacts and business associates. Examples include physician services in the emergency department, hospital and urgent care facility, radiology referrals, laboratory tests, and billing services associated with these associates. When these services are contracted, we may disclose your health information to our business associates so that they can perform the job we've asked them to do and bill you or your third-party payer for services rendered. To protect your health information, however, we require the business associate to appropriately safeguard your information.

Notification: We may use or disclose information to notify or assist in notifying a family member, personal representative, or another responsible person, for the purposes of continuing care. For example: A specialist we referred you to may not have your correct telephone number, and need to reschedule an appointment.

Organ procurement organization: Consistent with applicable law, we may disclose health information to organ procurement organizations or other entities engaged in the procurement, banking of transplantation of organs for the purpose of tissue donation and transplant.

Marketing: We may contact you to provide appointment reminders or information about treatment or other health related services that may be of interest to you.

Food and Drug Administration (FDA): We may disclose to the FDA health information relative to adverse events with respect to food, supplements, product and product defects, or post marketing surveillance information to enable product recalls, repairs, or replacement.

Workers Compensation: We may disclose health information to the extent necessary to comply with laws relating to workers compensation or other similar programs established by law.

Public Health: As required by law, we may disclose your health information to public health for legal authorities charged with preventing or controlling disease, injury, or disability.

We will not use or disclose your health information without your authorization, except as described in this notice. We will also discontinue using or disclosing your health information after we have received a written revocation of the authorization according to the procedures included in the authorization.

For More Information or to Report a Problem

If you have questions and would like additional information, you may contact the practice at (858)623-6333 or fax the office at (858)623-0204.

If you believe your privacy rights have been violated, you can file a complaint with the practices Privacy Officer or with the Office for Civil Rights U.S. Department of Health and Human Service. There will be no retaliation for filing a complaint with either Privacy Officer or the Office for Civil Rights. The address for the OCR is listed below.

Office for Civil Rights
U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Room 509F, HHH Building
Washington, D.C. 20201

Examples of Disclosure for Treatment, Payment and Health Operations

We will use your health information for payment.

For example: A bill may be sent to you or a third-party payer. The information on or accompanying the bill may include information that identifies you, as well as your diagnosis, procedures, and supplies used.

Law enforcement: We may disclose health information for law enforcement purposes as required by law or in response to a valid subpoena.

Federal law makes provisions for your health information to be released to an appropriate health oversight agency, public health authority or attorney, provided that a work force member or business associate believes in good faith that we have engaged in unlawful conduct or have otherwise violated professional or clinical standards and are potentially endangering one or more patients, workers or the public.

Please be aware that due to the new Federal privacy laws and regulations. ALL requests for ANY information from your medical record MUST be in writing and accompanied by your picture ID.

The Federal Government makes these policies mandatory. If you disagree with the HIPPA regulations, please notify your county or state legislator, as the medical industry has no control over their content, and compliance is mandatory.

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