



MID-VALLEY PAIN CLINIC NOTICE OF PRIVACY PRACTICES

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

Under applicable law, Mid-Valley Pain Clinic is required to protect the privacy of your individual health information (referred to in this notice as "Protected Health Information"). It is also a requirement to provide you with this notice regarding policies and procedures regarding your Protected Health Information (referred to as "PHI") and to abide by the terms of this notice, as it may be updated from time to time.

Uses and Disclosures that Do Not Require Written Authorization

In certain situations your written authorization to disclose your PHI is not required. These situations are based on professional judgment and may include:

- *Treatment, Payment, and Operations:* Your PHI may be used and disclosed in order to treat you, obtain payment for services provided to you and to conduct health care/mental health operations. From time to time, Business associates may assist in one or more tasks and may use, change or create PHI. Business associates are required to comply with all the privacy regulations on your behalf. An example would be the Medical Coder and Biller
- *Public Health Activities:* Your PHI may be disclosed for the following health activities (1) to report victims of domestic violence, child abuse, elder abuse or neglect to the Oregon Department of Human Services (DHS), (2) to law enforcement agencies in order to prevent or lessen a serious and imminent threat to a person's or the public's health or safety, (3) to report health information to public health authorities for the purpose of preventing or controlling disease, injury, or disability.
- *Law Enforcement Officials:* Your PHI may be disclosed to the police or other law enforcement officials as required or permitted by law or in compliance with a court order or a grand jury or administrative subpoena.
- *Judicial and administrative proceedings:* Your PHI may be disclosed in the course of a judicial or administrative proceeding in response to a legal order or other lawful process including a court order or grand jury or administrative subpoena.
- *As required by law:* Your PHI may be disclosed when required to do so by any other law not already referred to in the preceding categories.
- *Appointment reminders:* Your PHI may be disclosed in the form of appointment reminders, voice mail confirmations, and letters.
- *Disclosure to Family and Friends:* Your PHI to a family member, close friend or caregiver may be disclosed if (1) your agreement is obtained,(2) you are provided with reasonable time to object to the disclosure.

Uses and Disclosures that Require Written Authorization

For any other purpose, other than the ones described in the above section, your PHI may only be disclosed when you give written authorization.

Your Rights Regarding Protected Health Information

- You may ask to restrict uses and disclosures of your PHI to carry out treatment, payment, or healthcare operations, or to restrict uses and disclosures to family members, relatives, friends or other persons identified by you who are involved in your care or payment for your care. However, it is not a requirement to agree to your request.

- You have the right to request the following with respect to your PHI: (1) inspection and copying; (2) amendment or correction; (3) an accounting of the disclosures of this information (4) receipt of a paper copy of this notice upon request.
- If you want further information about your privacy rights, or wish to register a complaint you may contact Rick Meyers at (503)371-1970. You may also file a complaint with the Office for Civil Rights, U.S. Department of Health and Human Services. Mid-Valley Pain Clinic will not retaliate if you choose to file a complaint.

Mid Valley Pain Clinic reserves the right to change the terms of this notice and to make new notice provisions effective for all PHI maintained. This notice is effective 6/1/2008.

You may contact Mid Valley Pain Clinic for further information at:

670 Hawthorne Ave, SE, Suite 150
Salem, Oregon 97301
PH: (503) 371-1970
Fax (503) 871-0192

I have received information about protected health information and have had the opportunity to ask questions regarding my rights related to HIPAA regulations.

Name _____

Date _____