

Examples of Disclosures for Treatment, Payment, and Health Operations:

*We will use your health information for
treatment*

EXAMPLE: Information obtained by a physician, or other member of your health care team will be recorded in your record and used to determine the course of treatment that should work best for you. Your physician will document in your record his or her expectations of the members of your health care team. Members of your health care team will then record to actions they took and their observations. In that way, the physicians will know how you are responding to treatment.

*We will use your health information for
payment.*

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

For More Information or to Report a Problem:

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

Office for Civil Rights
200 Independence Avenue S.W.
Washington, D.C. 20201



Notice of Privacy Practices

**1308 South Main Street
1307 South Main Street
Plymouth, MI 48170
Phone: (734) 451-3440
Fax: (734) 451-8720**

Introduction:

At KaraLee & Associates, P.C. we are committed to treating and using protected health information about your responsibility. This notice of Health Information Practices describes the personal information we collect, and how and when 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 KaraLee & Associates, a record of your visit is made. 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 source of information for public health officials charged with improving health of this state and the nation,
- A tool with which we can assess and continually work to improve the care we render and the outcomes we achieve

Your Health Information Rights:

Although your health record is the physical property of KaraLee & Associates, P.C., 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 disclosures 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,
- Revoke your authorization to use or disclose health information except to the extent that action has already been taken

Our Responsibilities:

KaraLee & Associates 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, and
- Accommodate reasonable requests you may have to communicate health information by alternative means or at alternative locations.

We reserve the right to change our practices and to make the new provision effective for all protected health information we maintain. Should our information practices change, we will revise our copy and notify our patients. We will not use or disclose your health information without your authorization, except as described in this notice.