



## NOTICE OF PRIVACY PRACTICES

**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.**

A Woman's Place of Fort Collins, PLLC is required by law to maintain the privacy of your health information and to provide you with notice of its legal duties and privacy practices with respect to your health information. If you have questions about any part of this notice or if you want information about the privacy practices at A Woman's Place of Fort Collins, PLLC please contact:

Privacy Officer/Manager  
1224 E. Elizabeth Street  
Fort Collins, CO 80524  
(970) 221-4977

**Effective Date of This Notice April 14, 2003/Revised 1-1-2008**

**I. A Woman's Place of Fort Collins, PLLC may Use or Disclose Your Health Information**  
A Woman's Place of Fort Collins, PLLC collects health information from you and stores it in a chart and on a computer (EMR). This is your medical record. The medical record is the property of A Woman's Place of Fort Collins, PLLC, but the information in the medical record belongs to you. A Woman's Place of Fort Collins, PLLC protects the privacy of your health information. The law permits A Woman's Place of Fort Collins, PLLC to use or disclose your health information for the following purposes:

**Patients over the age of 14 will need to give their written consent to allow the staff of A Woman's Place of Fort Collins, PLLC to discuss information with another party, this includes spouses.**

**A. Treatment:**

1. Ordering lab or tests at another facility.
2. Providing surgical care at another facility.
3. A means of communication among other healthcare professionals and facilities that contribute to care including pathology and radiology.
4. A basis for planning care and treatment among other healthcare professionals and facilities that contribute care including pathology and radiology.
- 5 Prescribing or refilling of patient prescriptions and medications.

**B. Payment:**

1. A source of information for applying diagnoses and service information to a patient's bill.
2. Appealing a denial for the purpose of receiving payment for service.
3. Submission of claims for billing purposes.

**C. Regular Healthcare Operations:**

1. Intake of personal information so that treatment and payment operations can occur without interruption.
2. Scheduling of appointments within our facility and outside facilities where treatment may be coordinated.
3. Referral of patients to other outside facilities or professionals.

**D. Information provided to you.**

**E. Notification and communication with family:** We may disclose your health information to notify or assist in notifying a family member, your personal representative or another person responsible for your care about your location, your general condition or in the event of your death. If you are able to agree or object, we will give you the opportunity to object prior to making this notification. If you are unable or unavailable to agree or object, our health professionals will use their best judgment in communication with your family and others.

**F. Required by law:** As required by law, we may use and disclose your health information.

**G. Public Health:** As required by law, we may disclose your health information to public health authorities for purposes related to: preventing or controlling disease, injury or disability; reporting child abuse and neglect; reporting domestic violence; reporting to the Food and Drug Administration problems with products and reactions to medications; and reporting disease or infection exposure.

**H. Health Oversight Activities;** we may disclose your health information to health agencies during the course of audits, investigations, inspections, licensure and other proceedings.

**I. Judicial and Administrative Proceedings:** We may disclose your health information in the course of any administrative or judicial proceedings.

**J. Law enforcement:** We may disclose your health information to a law enforcement official for purposes such as identifying or locating a suspect, fugitive, material witness or missing person, complying with a court order or subpoena and other law enforcement purposes.

**K. Deceased person information:** We may disclose your health information to coroners, medical examiners and funeral directors.

**L. Organ donations:** We may disclose your health information to organizations involved in procuring, banking or transplanting organs and tissues.

**M. Research:** We may disclose your health information to researchers conducting research that has been approved by an Institutional Review Board...

**N. Public Safety:** We may disclose your health information to appropriate persons in order to prevent or lessen a serious and imminent threat to the health or safety of a particular person or the general public.

**O. Worker's Compensation:** We may disclose your health information as necessary to comply with worker's compensation laws.

**P. Marketing:** We may contact you to provide appointment reminders or to give you information about other treatments or health related benefits and services that may be of interest to you.

**II. When A Woman's Place of Fort Collins, PLLC may not use or disclose your health information:**

Except for described above in this notice of privacy practices, A Woman's Place of Fort Collins, PLLC will not use or disclose your health information without your written authorization. If you do not authorize us to use or disclose your health information for another purpose, you may revoke your authorization in writing at any time.

**III. Your Health Information rights**

- A. You have the right to request restrictions on certain uses and disclosures of your health information. A Woman's Place of Fort Collins, PLLC is not required to agree to this restriction that you request.
- B. You have the right to receive your health information by signing A Woman's Place of Fort Collins, PLLC Authorization to Release Records form. There may be charges associated with the copying of the records. Please inquire with medical records.
- C. You have the right to inspect your health information.
- D. You have the right to request amendments to your health information that is incorrect or incomplete. A Woman's Place of Fort Collins, PLLC is not required to change your health information and will provide you with the denial and how to appeal the denial.
- E. You have a right to receive accounting disclosures of your health information made by A Woman's Place of Fort Collins, PLLC described in treatment, payment, healthcare options, information provided to you.

**Changes to this Notice of Privacy Practices:**

A Woman's Place of Fort Collins, PLLC reserves the right to amend this Notice of Privacy Practices at any time in the future. Until such amendment is made, A Woman's Place of Fort Collins, PLLC is required by law to comply with this notice.

Complaints: Complaints about this Notice of Privacy Practices or how A Woman's Place of Fort Collins, PLLC handles your health information should be directed to:  
Manager or Clinical Services or Privacy Officer

If you are not satisfied with the manner in which this office handles a complaint, you may submit a formal complaint to:

Dept of Health and Human Services  
Office of Civil Rights  
Hubert H. Humphrey Bldg.  
200 Independence Ave, S.W.  
Room 509F HHH bldg  
Washington, DC 20201

You may also address your complaint to one of the regional offices for Civil Rights. A list of these offices can be found online at <http://www.hhs.gov/ocr/regmail.html>.