

HIPAA PRIVACY POLICY **HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT**

This notice describes how **protected health information (PHI)** about your child/you may be used and disclosed and how you can get access to this information. PHI is about your child, including demographic information that may identify you and may relate to your child's past, present or future physical or mental health condition and related health care services. Please review it carefully.

Understanding your or your child's health record / information

When your child becomes a patient at the Center for Pediatric Therapy, Inc. (CPT), there is basic demographic and historical information that you provide to us that we place it in your child's file. Each time your child has an appointment with one of our therapists, a record of the visit is made. Typically, this record contains diagnostic, evaluation and treatment information including information you shared with us from other health care providers. It may also contain a plan for future care or treatment. This information is often referred to as a health or medical record and serves as a:

- Basis for planning your child's care and treatment
- Means of communication among the many health and other professionals who contribute to your child's care
- Legal document describing the care your child received
- Means by which you or a third party can verify that services billed were actually provided
- A tool in educating health professionals
- A source of data for ongoing care
- A possible source of information for planning and marketing for CPT. (This mailing list would be for CPT use only and not shared with any other organizations)
- A tool with which we can assess and continually work to improve the care we render and the outcome we achieve

Understanding what is in your health record and how your health information is used helps you to:

- Ensure its accuracy
- Better understand who, what, when and why others may access your health information
- Make more informed decisions when authorizing disclosure to others

Your Health Information Rights

Although your health record is the physical property of the health care practitioner or facility that compiled it, the information belongs to you. You have the right to:

- Request a restriction on certain uses and disclosures of your information
- Obtain a paper copy of the notice of information practices upon request
- Inspect and copy your health record
- Amend your health record
- Obtain an accounting of disclosures of your health record
- Revoke your authorization to use or disclose some or all health information to all or some individuals, except to the extent that it has already been used

Our Responsibilities

CPT is required to:

- Maintain the privacy of your health information
- Provide you with a notice as to our legal duties and privacy practices with respect to information we collect and maintain about you or your child
- Notify you if we are unable to agree to a requested restriction
- Accommodate reasonable requests you may have to communicate health information

We reserve the right to change our practices and to make new provisions effective for all PHI we maintain, provided that it is legal under the HIPAA laws. Should our information practices change, we will mail a revised notice to the address you've supplied us.

We will not use or disclose health information without your authorization, except as described in this notice.

Examples of disclosures for treatment, payment and health procedures

We will use your health information for treatment: For example, your therapist will record the events of a session and may indicate plans for the next session, which may include communicating with outside providers, school personnel, or other family members. Because we work as a team, we may share information with another therapist who serves your child. This is to maximize the quality of care and provide consistency.

We will use your health information for payment: For example, a bill may be sent to you or a third-party payer (your health insurance company). The information on or accompanying the bill may include information that identifies you, as well as your child's diagnosis, procedure codes, plan of care and progress.

***Keep this HIPAA Privacy Policy document for your records.
You will be required to sign an Acknowledgment of Receipt & Understanding.***