



ESSEX ORTHOPAEDICS & OPTIMA SPORTS MEDICINE  
16 PELHAM ROAD, SUITE 1  
SALEM, NH 03079  
603-898-2244

## Notice of Privacy Practices

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

### Introduction

At **Essex Orthopaedics & Optima Sports Medicine** we are committed to treating and using protected health information about you responsibly. 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 our protected health information. This Notice is effective 1/1/2003, and applies to all protected health information as defined by federal regulations.

### Understanding Your Health Record/Information

Each time you visit **Essex Orthopaedics & Optima Sports Medicine**, 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 the 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 for our patients

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

### Your Health Information Rights

Although your health record is the physical property of **Essex Orthopaedics & Optima Sports Medicine**, 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 164.526
- 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 by 45 CFR 164.522. However, Essex Orthopaedics Inc. is not required to agree to a requested restriction
- Revoke your authorization to use or disclose health information except to the extent that action has already been taken

### Our Responsibilities

**Essex Orthopaedics & Optima Sports Medicine** 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 provisions effective for all protected health information we maintain. Should our information practices change, we will mail a revised notice to the address you've supplied us.

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

### Examples of Disclosure for Treatment, Payment and Health Operations

*We will use your health information for treatment*

**For example:** Information obtained by a physician, nurse, physical therapist, or other member of our 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 the actions they took and their observations. In that way, the physician will know how you are responding to treatment.

We will also provide your primary care physician with copies of various reports that should assist him or her in treating you once you're discharged from this practice.

*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.

*We will use your health information for health care 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 health care service we provide.

*Business Associates:* There are some services provided in our organization through contacts with business associates

**For example:** durable medical equipment providers and billing services. When these services are contracted, we may disclose your health information to our business associate 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.

*Appointments:* We may contact you to provide appointment reminders or information about treatment alternatives or other health-related benefits and services that may be of interest to you.

*Notification:* We may use or disclose information to notify or assist in notifying a family member, personal representative, or another person responsible for your care, your location, and general condition.

## **Examples of Disclosure for Treatment, Payment and Health Operations**

*Communication with Family:* Health professionals, using their best judgment, may disclose to a family member, other relative, close personal friend or any other person **you identify** health information relevant to that person's involvement in your care or payment related to your care.

*Training:* We may disclose information in the course of conducting training programs in which students, trainers, or health care practitioners learn under supervision to practice or improve their skills as health care providers. At this time all trainees will be required to sign a **"Workforce Confidentiality Agreement"** stating that they will abide by the privacy policies of **Essex Orthopaedics & Optima Sports Medicine**

*Research:* We may disclose information to researchers when their research has been approved by an institutional review board that has reviewed the research proposal and established protocols to ensure the privacy of your health information.

*Funeral Directors:* We may disclose health information to funeral directors consistent with applicable law to carry out their duties.

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

*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 authorized by and 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 or legal authorities charged with preventing or controlling disease, injury or disability.

*Correctional Institution:* Should you be an inmate of a correctional institution, we may disclose to the institution or agents thereof health information necessary for your health and the health and safety of other individuals.

*Law Enforcement:* We may disclose health information for law enforcement purposes such as reporting information relating to victims of abuse, neglect, or domestic violence.

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

## **For More Information, or To Report a Problem**

If you have questions and would like additional information, you may contact:

**Essex Orthopaedics & Optima Sports Medicine** - Privacy Officer Sheila Dowd at 603-898-2244

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 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