

SUMMARY OF NOTICE OF PRIVACY PRACTICES

INTERNAL MEDICINE ASSOCIATES

8895 Broadway; Merrillville, IN 46410

(219) 738-2081

THIS DOCUMENT SUMMARIZES THE HIPAA NOTICE OF PRIVACY PRACTICES THAT DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. THIS DOCUMENT IS NOT INTENDED TO BE ALL INCLUSIVE, AND YOU ARE ADVISED TO REVIEW THE ENTIRE NOTICE OF PRIVACY PRACTICES CAREFULLY TO BE FULLY INFORMED ON THIS SUBJECT.

Individuals working on behalf of Internal Medicine Associates follow specific guidelines when handling personal, medical information about you that is a necessary part of providing you with quality care and complying with certain legal requirements. We may use and disclose medical information about you for several reasons, including reasons that fall into the following categories:

- Treatment
- Payment
- Health Care Operations
- Appointment Reminders
- Uses and Disclosures of Protected Health Information Based Upon Your Written Authorization
- Others Involved in Your Healthcare
- Health-Related Benefits and Services
- Treatment Alternatives
- Follow-Up Care

We may use or disclose your protected health information in certain situations without your authorization, including situations that pertain to issues such as the following:

- Required By Law
- Public Health
- Communicable Diseases
- Health Oversight
- Abuse or Neglect
- Food and Drug Administration
- Legal Proceedings
- Coroners, Funeral Directors, and Organ Donation
- Research
- Required Uses and Disclosures
- Inmates
- Workers' Compensation
- Military Activity and National Security
- Criminal Activity
- Law Enforcement

You have specific rights with respect to your protected health information, including the following examples which illustrate how you may exercise these rights.

- You have the right to inspect and copy your protected health information.
- You have the right to request a restriction of your protected health information.
- You have the right to have your physician amend your protected health information.
- You have the right to receive an accounting of certain disclosures we have made, if any, to your protected health information.
- You have the right to obtain a paper copy of the entire Notice of Privacy Practices from us.

Omnibus Final Rule: 2013

Final modifications to the HIPAA Privacy, Security, and Enforcement Rules mandated by the Health Information technology for Economic and Clinical Health (HITECH), Act, are as follow:

- You have the right to be notified of a data breach.
- You have the right to ask for a copy of your electronic medical record in an electronic form.
- If you pay in cash in full (out of pocket) for your treatment, you can instruct Internal Medicine Associates not to share information about your treatment with your health plan.
- Certain uses of your medical data, such as use of patient information in marketing, require prior disclosure and your authorization. Uses and disclosures not described in this notice will be made only with your authorization.
- You have the right to opt out of fundraising communications from Internal Medicine Associates, & Internal Medicine Associates cannot sell your health information without your permission.

You may complain to us or to the Secretary of Health and Human Services if you believe your privacy rights have been violated by us. You may obtain further information about the complaint process or file a complaint with us by notifying our Privacy Officer, at (219) 738.2081 or by email at sdallas@ima-med.com. The web site for the Office of Civil Rights is: www.hhs.gov/ocr/hipaa We will not retaliate against your for filing a complaint.

This document was published and becomes effective on April 14, 2003. (Revised 7-1-2013)

Name (Please print)

Medical Record Number

Patient Signature

Date

OFFICE USE ONLY (THIS FORM MUST BE RETAINED PERMANENTLY)

I attempted to obtain the patient's signature in acknowledgement on this Notice of Privacy Practice Acknowledgement, but was unable to do so as documented below:

Date:	Initials:	Reason: