



BEVERLY PODIATRY



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Notice of Privacy Practices

Your Information, Your Rights, Our Responsibility.

This notice describes how medical information about you may be used and disclosed, and how you can get access to this information. This notice applies to Beverly Podiatry, and its designated entities.

Your Rights:

When it comes to your health information, you have certain rights:

- **Obtain an electronic or paper copy of your medical records.**
 - You can ask to see/obtain a paper or electronic copy of your medical records and other health information we have about you, or we can provide you with a copy or summary of your health information (usually within 30 days upon your request, which may result in a cost-based fee)
- **Limit the information we use/share – Request Confidential Communications**
 - You can ask us to not use or share certain health information
 - Ask to be contacted in a specific way (home, office, email)
- **Choose someone to act for you**
 - If you are unable to make health care decisions for yourself, a medical power of attorney, or legal guardian can make these decisions for you.
- **Ask us to Correct your medical records (Update any health/billing information)**
- **Request a copy of your medical record, as well as this Privacy Notice**
- **File a complaint if you feel your rights were violated**

Your Choices:

When it come to your health information, you have certain choices:

- **Share information with your family or close friends.**
- **Share information in a disaster relief situation.**

- **You may ask to have your name taken off the directory list.**
- When admitted to the hospital, your name, room location, general condition, and religion may be listed in that hospital's directory.

If you are not able to tell us your preference, for any reason (being unconscious), we may go ahead and share your information if we believe it is in your best interest.

In these certain cases we NEVER share your information unless you give us written permission.

- Marketing purposes
- Sale of your information

Our Uses and Disclosure:

When it comes to your health information, Beverly Podiatry, Inc. shares an electronic medical record for patient care that is used by:

- **Partners**
- **Partners member organizations (e.g., hospitals, outpatient) and health care providers**
- **Other non-Partners providers, such as Dana-Farber Cancer Institute (DFCI), and certain community physicians and physician groups.**

For questions, or if you would not like us sharing your information using the Mass HI way, contact the Partners Privacy Office through the Partners Compliance Help Line at (800) 856-1983 or www.partners.org/complianceline.

Sharing Health Information:

When it comes to your health information, we use or share it in the following ways:

- **Treat you**
 - We may share your health information with other professionals who are treating you.
- **Run our organization**
 - We may share your health information to help our affiliated hospitals or physician practices, improve your care, and contact you when necessary.
- **Bill for your service**
 - We may share your health information to bill and get payment from health plans or other entities.
- **Contact you:** We may use your health information to contact you:

- At the address and numbers, you have given to us including leaving messages at the telephone numbers.
- About patient care issues, treatment choices, and follow up care instructions.
- At the email address or other contact information you provide to assist us in activities described in this Notice.

Sharing Health Information without Authorization:

When it comes to your health information, we can use or share it without authorization in the following ways:

- **Public health and safety issues**
 - Preventing disease
 - Helping with product recalls
 - Reporting reactions to medications
 - Reporting suspected abuse, neglect, or domestic violence
 - Preventing or reducing a serious threat to anyone's health or safety
- **Perform research**
 - Research that is approved by a Partners Research Committee
- **Comply with the law**
 - Share information if state or federal laws require it
 - Department of health require it
 - Human services if it wants to see that were complying with federal privacy law
- **Respond to organ and tissue donation requests**
 - Organ procurement organizations
- **Medical examiner or funeral director**
 - Share information with a coroner, medical examiner, or funeral director
- **Address workers' compensation, law enforcement, and other government requests**
 - Workers' compensation claims
 - Law enforcement purposes such as reporting a crime
 - Health oversight agencies for activities authorized by law
 - Military, national security, and presidential protective services
- **Respond to lawsuits and legal actions**
 - Court or administrative order, or in response to a subpoena

For more information, see:

www.hhs.gov/hipaa/for-individuals/index.html

Written Permission for Sharing Health Information:

When it comes to your health information, we may NOT share any information for any purposes that are not described in this notice, unless you give us written

permission. We will ask for your consent before we share certain sensitive information such as:

- **The Law**
 - Records from a federally funded substance use disorder program
 - Psychotherapy documentation
 - HIV testing or test results
 - Genetic information
 - Confidentiality with a Licensed Social Worker
 - Records of Domestic Violence Victim Counselor or Sexual Assault Counselor

We may share your health information without consent if necessary to report child or elder abuse or neglect, and for other purposes as allowed by law.

You may cancel an authorization or consent at any time in writing if we haven't already shared your health information with whom you previously gave us written permission.

Our Responsibilities:

- **Required by law to maintain the privacy and security of your health information.**
- **Notify you if a breach occurs that has compromised the privacy of your information.**
- **Follow the duties and privacy practices described in this notice and offer you a copy.**
- **Will not use or share your information other than described unless given permission.**
- **Partners maintains hospital records for at least 20 years after your discharge or final treatment.**

For more information, see: www.hhs.gov/hipaa/for-individuals/notice-privacy-practices/index.html.

Changes to the Terms of this Notice:

We may change the terms of this Notice, and the changes will apply to all information we have about you. The new Notice will be available upon request in registration areas, on our website at www.beverlypodiatry.com, or you can request a copy by contacting our office at (978) 922-0288

Effective Date of this Notice:

January 1, 2017