



## **HIPAA Notice of Privacy Practices**

**First Choice Medical Group has a policy to comply with the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Our objective is to be 100% compliant at all times. The following method of operations will be used to ensure privacy of a patient's Protected Health Information (PHI).**

1. Based on HIPAA guidelines, a patient's medical records may be transferred to another care provider upon your signed authorization. Records will not be transferred without you or your guardian's signed authorization.
2. If a referral of your specimen to another medical provider is required, only the necessary information to refer to the specimen will be provided.
3. If you elect to not allow any other member of your family access to your records you have the right to notify First Choice Medical Group as they are the owner of the records. That notice must be in writing. If you wish to provide access to your records to a designated individual, you may also provide that notice in writing.
4. Our office will not provide any information about you or your medical condition to any other party other than medical providers to whom you have been referred for treatment and your insurance carrier without your specific authorization.
5. If you are chosen to be part of any research program you will be required to sign additional authorizations and releases, so that your PHI may be used in the program.
6. Under HIPAA rules, we may use the necessary PHI from your medical records to file insurance claims on your behalf. Your authorization and insurance assignment allows the practice to file insurance on your behalf.
7. Under HIPAA guidelines you have the right to review your records by scheduling a time with the office. The request must be in writing to the practice as they are the owner of the records.
8. After review of your records if you disagree with any of documentation in the records you have the option of writing your own documentation to be placed in the chart.
9. There will be certain circumstances where public health authorities and health oversight agencies may require a copy of your records. They are authorized under law to collect that information and we are required to furnish a copy of your protected PHI.
10. All efforts will be taken to ensure that your PHI will not be shared with any unauthorized persons.
11. If you are on active duty military or called to active duty military, under federal law we are required to supply a copy of your medical record.

**If you should have any questions concerning any of the above,  
please contact the staff at First Choice Medical Group**