



Ophthalmic Consultants Northwest

PRIVACY POLICY NOTICE

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

Ophthalmic Consultants Northwest respects your privacy. We understand that your personal health information is very sensitive. We will not disclose your information to others unless you tell us to do so, or unless the law authorizes us to do so.

The law protects the privacy of the health information we create and obtain in providing our care and services to you. For example, your protected health information includes your symptoms, test results, diagnoses, treatment, health information from other providers, and billing and payment information relating to these services. Federal and state law allows us to use and disclose your protected health information for purposes of treatment and health care operations. State law requires us to get your authorization to disclose this information for payment purposes.

Examples of Use and Disclosure of Protected Health Information for Treatment, Payment, and Health Operations.

Information obtained by a nurse, technician, physician or other member of our health care team will be recorded in your medical record and used to help decide what care may be right for you.

- We may also provide information to others providing your care. This will help them stay informed about your care.

For payment:

- We request payment from your health insurance plan. Health plans need information from us about your medical care. Information provided to health plans may include your diagnoses, procedures performed or recommended care.

For health care operations:

- We use your medical records to assess and improve services.
- We may use and disclose medical records to review the qualifications and performance of our health care providers and to train our staff.
- We may contact you to remind you about appointments and give you information about treatment alternatives or other health-related benefits and services.
- We may use and disclose your information to conduct or arrange for services including:
 1. Medical quality review by your health plan
 2. Accounting, legal, risk management and insurance services
 3. Audit functions, including fraud and abuse detection and compliance programs

Your Health Information Rights

The health care billing records we create and store are the property of Ophthalmic Consultants Northwest. The protected health information in it, however, generally belongs to you. Under certain circumstances we have the right to deny you access. You have the right to:

- Receive, read and ask questions about this notice.
- Restrict certain uses and disclosures. We are not required to grant the request. In this case, your medical records will be released directly to you.
- Request and receive from us a paper copy of the most current Privacy Policy Notice.
- Request that you be allowed to see and get a copy of your protected health information. This request must be in writing. We have a form available for this type of request.
- Have us review a denial of access of your health information.
- Ask us to change your health information. You may write a statement of disagreement if your request is denied. It will be stored in your medical record and included with any release of your records.
- When you request, we will give you a list of disclosures of your health information. The list will not include disclosures to third-party payers. You may receive this information, as well as a copy of your health information, without a charge once every 12 months. We will notify you in advance of any cost involved if you request this information more than once every 12 months.
- Ask that your health information be given to you by another means or at another location. Please sign, date and give us your request in writing.
- Cancel prior authorizations to use or disclose health information by giving us a written revocation. Your revocation does not affect information that has already been released. It also does not affect any action taken before we have it. Sometimes, you cannot cancel an authorization if its purpose was to obtain insurance.

Our Responsibilities:

- Keep your health information private
- Give you this notice
- Follow the terms of this notice

We have the right to change our practices regarding the protected health information we maintain. If we make changes, we will update this notice. You may receive the most recent copy of this notice by mail, by visiting our office in person, or online at www.seattlecornea.com.

To Ask Questions or Make a Complaint

If you have questions, want more information, or want to report a problem/complaint about the handling of your protected health information, you may contact:

The Office Manager at (206) 386-2516

If you believe your privacy rights have been violated, you may discuss your concerns with the Office Manager. You may also deliver a written complaint to either office location. You may also file a complaint with the U.S. Secretary of Health and Human Services.

Other Disclosures and Uses of Protected Health Information

Notification of Family and Others

- Unless you object, we may release health information about you to a friend or family member who is involved in your medical care. We may also give information to someone who helps pay for your care. In addition, we may disclose health information about you to assist in disaster relief. If you object, we will not use or disclose it.

We may use & disclose your protected health information without your authorization as follows:

- Another physician within Ophthalmic Consultants Northwest may review records for the purpose of random review as part of quality improvement.
- To medical researchers: if the request has been approved and has policies to protect the privacy of your health information.
- To funeral directors/coroners.
- To organ procurement organizations.
- To the Food & Drug Administration (FDA).
- To comply with Workers' Compensation Laws: if you made a workers' compensation claim.
- For Public Health & Safety purposes as allowed or required by law and Health & Safety Oversight Activities.
- To report suspected abuse or neglect.
- For law enforcement purposes and to correctional institutions.
- For work-related conditions that could affect employee health.
- To the military authorities of U.S. and Foreign Military Personnel as required by law.
- In the course of judicial administrative proceedings at your request or as directed by a subpoena or court order.
- For specialized government functions.
- Uses and disclosures not in this notice will be made only as allowed or required by law with your written authorization.