

HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)

NOTICE OF PRIVACY PRACTICES

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.**

YOUR RIGHTS :

You have the right to get a copy of your paperwork or electronic medical record, correct your paper or electronic medical record, request confidential communication, ask us to limit the information we share, get a list of those with whom we've shared your information, get a copy of this privacy notice, choose someone to act for you, file a complaint if you believe your privacy rights have been violated. If you have a complaint on how Finest Physical Therapy has handled your health information and are not satisfied with the manner in which Finest Physical Therapy has handled your complaint you can submit a formal complaint to: DHHS, Office of Civil Rights 200 Independence Avenue, S.W., Washington, D.C. 20201.

YOUR CHOICES:

You have some choices in the way that we use and share information as we tell family and friends about your condition, provide disaster relief, include you in a hospital directory, provide mental health care, market our services and sell your information, raise funds.

OUR USES AND DISCLOSURES:

We may use and share your information as we treat you, run our organization, bill for our services, emergencies, help with public health and safety issues, do research, marketing-with your permission, comply with the law, respond to organ and tissue donation requests, work with the medical examiner of funeral director, address workers' compensation, law enforcement and other government requests, respond to lawsuits and legal actions.

OUR RESPONSIBILITIES:

We are required by law to maintain the privacy and security of your protected health information. We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information. We must follow the duties and privacy practices described in this notice and give you a copy of it. We will not sue or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

Changes to the Terms of this Notice:

Finest Physical Therapy, LLC can change the terms of this notice at any time and the changes will apply to all information it maintains. The new notice will be available upon request. If you have any questions or would like further information please contact Brenda Kaplan, P.T. 201-746-9888 or email

brenda@finestphysicaltherapy.com.