

Notice of Privacy Practices

What is the Purpose of this Document?

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.



Hamburg Office:
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Hamburg, NY 14075
(716) 646-1084

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Depew, NY 14043
(716) 683-4196

Our Statement:

As a medical practice it is our duty to keep your medical and personal information protected. It is required by law that we uphold this duty by maintaining the privacy and security of your protected healthcare information. If a breach of this information were to occur, our office would notify you immediately and do everything in our power to help resolve the issue.

It is our responsibility to make sure that all our patients can trust our office with sensitive information by actively working on our HIPAA compliance. The privacy practices found within this document are one of our top priorities.

We will never share, or use, any of your information for anything outside the parameters of what is mentioned in this document, unless you give us permission—in writing—stating otherwise. This permission can always be revoked at any time via a written statement.

Our office continues to dedicate time and effort to remain HIPAA compliant. Our employees receive annual HIPAA training to ensure the protection of your medical records and documents.

If, after reviewing this document, you are still looking for more information or clarification please visit: <https://www.hhs.gov/hipaa/for-individuals/index.html>

What is HIPAA?

HIPAA stands for the Health Insurance Portability and Accountability Act. Passed in 1996 this law dictates how medical professionals oversee their patient's medical information.

This allows for patients to have more say over who can access their protected privacy information and creates boundaries surrounding the use and release of said records. With

HIPAA, there are safeguards in place to ensure your rights are being maintained by any medical practice you visit.

Your Rights

The HIPAA law grants you rights that allow you to dictate who can access your information and how it is used.

Below, you can find an overview of those rights and our responsibilities regarding those rights.

Placing Limitations on What Our Office Uses and Shares

You can request that our office does NOT share or use certain information for treatment, payment, or operational purposes. However, we reserve the right to decline this request if we believe it would negatively impact our ability to care for you properly. *

You may also request that we do not share any information regarding services or health care items, that you pay for out-of-pocket for, with your health insurer as long as it is not required by law for us to do so.

*We will do our best to accommodate any limitations you would like to place on your records, but your care is our top priority.

Asking for Corrections to your Records

If you think there is a discrepancy with your health information including incorrect or incomplete information, you may request changes. Do not hesitate to ask our office about how to submit any appeal requests. *

*We reserve the right to deny your request and will give you a written explanation as to why we denied it within 60 days.

Access to your Own Records

You may request a digital or hard copy of your medical records or any other health information we have regarding your person. Do not hesitate to ask our office about how to request these records. It will normally take us at least 30 days to provide you with these documents. *

*We may charge a reasonable and cost-based fee for this service.

Confidential Communications Requests

How our office maintains contact with you, is up to you. You can request that our office contacts you via specific forms of communication for example: portal, phone, mail. You may also request that we not contact you via certain forms of communication.

*Our office will comply with all reasonable requests.

Accessing a Copy of this Privacy Notice

You can request a paper copy of this document at any time.

Your Rights

Your rights continued.

Accessing a List of Who has Been Sent your Records

At any time, you may request that our office provides you with a list of when, where, and why your records have been sent. We will provide you with this list dating back to six years prior to the date this request was made on.

We will provide one free list—upon request—each year. Any other requests made within 12 months of the last will incur a reasonable, cost-based fee.

Choosing Someone to Act on your Behalf

In the event of the deterioration of your capacity to make decisions for yourself regarding your care you may appoint someone as your MEDICAL power of attorney. A regular power of attorney does not have the same authorization as a medical power of attorney. * This is a legal role that our office will need legal documentation of in order to carry out this request. Our office will always make sure that before anyone makes any decisions regarding your care, they have obtained this role.

*NYS is a HIPAA based state, which means that a non-medical power of attorney may sign certain documents for a patient, but they can't make any decisions on the patient's behalf. A medical power of attorney can sign/make changes to a patient's HIPAA Privacy Statement, exercise your rights, and make choices regarding your health information.

Filing a Complaint if you Feel your Rights were Violated

If you feel as though your rights have been violated, please reach out to our office, and we will do everything we can to amend the situation.

If you don't feel comfortable speaking to our office directly, you can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Ave, S.W., Washington, D.C. 20201, calling 1 (877) 696-6775, or visiting their website at www.hhs.gov/ocr/privacy/hipaa/complaints/.

Our office will not retaliate against you for filing a complaint.

Your Choices

Regarding certain health information, you have some say over what we share, and with whom.

If you have any preferences for who we share your information with in any of the situations described below, please let us know so that we can properly accommodate your requests.

If you are unable to tell us your preferred treatment option—for example if you are incapacitated, or unconscious—you have a few options to dictate who can receive your information. As a preemptive action you can give us permission, or revoke permission, to us to share your information with:

1. Your family, close friends, or anyone else involved in your care.
 - a. This is why it is important to keep your HIPAA privacy statement up to date and accurate as those individuals listed are who we would contact in the case of an emergency.
2. Disaster relief teams.
3. Hospital directories.

*In a situation such as the one described above, we may disclose necessary information if it is in your best interest or will assist to lessen a serious and imminent threat regarding your health and safety. While we take your requests seriously it is important to note that HIPAA allows our office to disclose any information, we deem pertinent to make sure you receive the necessary care in the event of an emergency.

Unless you give us written permission, we will NEVER use your information for:

1. Marketing purposes.
2. The sale of your information.
3. Most sharing of psychotherapy notes.

Our office has partnered with Catholic Medical Partners (CMP). This program may reach out to you on our behalf on occasion. If you are ever contacted by an affiliate and do not wish to be contacted by them in the future, we will need a written statement saying so.

This goes for any other reason our office may contact you beyond the scope of your care. You may also choose how our office contacts you whether it be via call, text, portal message, and/or mail.

Our Use & Disclosure

How does our office normally use and share your health information?

Below you can find the ways/reasons that our office typically utilizes and gives out your information.

Your Treatment	Our office will use your health information to provide you with medical care and share this information with any professionals who are involved in your treatment.	For example, if our office were to give you a referral to a specialist's office, we would provide them with the necessary information to assist them in properly treating you.
Necessary Business Operations	We use and share your health information to improve your care, contact you when necessary, and for any other necessary daily business operations.	For example, we use your information to give you proper and necessary treatment/services.
Billing Purposes	Our office will provide any necessary information to your health insurance provider and any other billing entities.	For example, when you come in for an office visit, we send the relevant information to your insurance provider so that they will cover your visit beyond your copay.

How else can our office use or share your information?

While the above is the typical ways in which we use and share your protected health information there are other reasons our office is allowed—in some cases we may even have an obligation—to share your information. These are usually situations in which your health information can contribute to the public good, such as public health/safety and research purposes. However, before we can do this, we must meet many conditions laid out by the law prior to sharing your information for these purposes. On the next page you can find a list of examples of these situations.

For more information visit:

<https://www.hhs.gov/hipaa/for-individuals/index.html>

How else can our office use or share your information?

Below you will find examples of the extenuating circumstances in which we may be required/allowed to share your health information.

Assisting with Public Health and Safety Issues:

We can share your health information in situations such as:

- Disease prevention.
- Assisting with product recalls.
- Reporting adverse reactions to medications.
- Reporting suspected abuse, neglect, or domestic violence.
- Preventing or reducing any serious risk to anyone's health or safety.

Research Purposes:

We can use/share your information for the purpose of health research.

To Comply with the Law:

We are obligated to provide your health information if state or federal law were to require it. This includes the Department of Health and Human Services if they would want to evaluate our compliance with federal privacy law.

Responding to Organ and Tissue Donation Requests:

We can share your health information with organ procurement organizations if you are a registered organ donor.

Our Use & Disclosure Continued.

Assisting a Medical Examiner or Funeral Director:

We can share health information with a coroner, medical examiner, or funeral director when an individual passes away.

Addressing Law Enforcement, and Other Government Requests:

We can use/share your health information:

- For law enforcement purposes.
- With a law enforcement official.
- With health oversight agencies for activities authorized by the law.
- For special government functions such as military, national security, and presidential protective services.

Responding to Lawsuits and Other Legal Actions:

In the event that we receive a request for your health information by a court or administrative order—i.e. a subpoena—we are obligated to comply with that request.

Changes to the Terms of This Notice:

We can 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, on our web site, and we will mail a copy to you or send it through the patient portal when applicable.

Protection of Reproductive Health Care Information

In April of 2024 the Final Rule was adopted into law under HIPAA. It created specific standards regarding the use, disclosure, and protection of Reproductive Health Care.

What is Reproductive Health Care?

Reproductive health care as defined by the Final Rule is as follows: Reproductive Health Care means health care, that affects the health of an individual in all matters relating to the reproductive system and to its functions and processes. This definition shall not be construed to set forth a standard of care for or regulate what constitutes clinically appropriate reproductive health care.

When Can't Reproductive Health Care be Disclosed?

1. To conduct a criminal, civil, or administrative investigation into or impose criminal, civil, or administrative liability on any person for the mere act of seeking, obtaining, providing, or facilitating reproductive health care, where such health care is lawful under the circumstances in which it is provided.
2. The identification of any person for the purpose of conducting such investigation or imposing such liability.

If a request for protected health information, where Reproductive Health Care information may be concerned, is received our office will request a signed attestation stating that the information is not being requested for prohibited uses. We will not send any of this information without receiving a signed attestation.

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