



PRIVACY POLICY

It is the policy of our practice that all physicians and staff preserve the integrity and the confidentiality of the protected health information pertaining to our patients. The purpose of this policy is to ensure that our practice and its physicians and staff have the necessary medical and protected health information (PHI) of our patients to the highest possible degree. Patients should not be afraid to provide information to our practice and its physicians and staff for the purpose of treatment, payment and healthcare operations. To that end, our practice and its physicians and staff will:

- *Adhere to the standards set forth in the Notice of Privacy Practices.
- *Collect, use and disclose PHI only in conformance with the state and federal laws and current patient covenants and/or authorizations, as appropriate. Our practice and its physicians and staff will not use or disclose PHI for use outside of Horizon Pediatrics, PC, such as marketing, employment, life insurance applications, etc. without an authorization from the patient.
- *Use or disclose PHI to remind patients of their appointments unless they instruct us not to.
- *Recognize that PHI collected about patients must be accurate, timely, complete, and available when needed. Our practice and its physicians and staff will update your information in a confidential manner as soon as we know it has changed.
- *Act as reasonable information stewards and treat all PHI as sensitive and confidential. Consequently, our practice and its physicians and staff will:
 - *Treat all PHI data as confidential in accordance with professional ethics, accreditation standards, and legal requirements.

- * Not disclose PHI data unless the patient (or his/her authorized representative) has properly authorized the release or the release otherwise noted by law.
- * Recognize that although our practice "owns" the medical record, the patient has a right to inspect and obtain a copy of his/her PHI. In addition, patients have the right to request an amendment to his/her medical record if he/she believes the information is inaccurate or incomplete. Our practice and its physicians and staff will:
 - Permit patient's access to their medical records when written requests are approved by our practice. If a request is denied, then we must have an onsite healthcare professional review the patients appeals.
 - * Provide patients and opportunity to request the correction of inaccurate or incomplete PHI in their medical records in accordance with the law and professional standards.
 - * All physicians and staff of our practice will maintain a list of certain disclosures of PHI for the purpose other than TPA for each patient and those made pursuant to an authorization as required by HIPPA rules. We will provide this list to patients upon written request.
 - * All physicians and staff of our practice will adhere to any restrictions concerning the use or disclosure of PHI that patients have requested and have been approved by our practice.
 - * All physicians and staff of our practice must adhere to this policy. Our practice will not tolerate violations of this policy. Violation of this policy is grounds for disciplinary action, and includes termination of employment and criminal and professional sanctions in accordance with our practice's personal rules and regulations.
- * Our practice may change this privacy in the future. Any changes will be effective upon the release of a revised privacy policy and will be made available to patients upon request.