

## The Patient's Rights Under HIPAA

Under the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Public Law 104-191, you are guaranteed certain rights in any and all healthcare environments or healthcare providers (Physicians) offices.

Patients are granted the following federal rights that allow them to be informed about their private health information (PHI) and to control how their PHI is used and disclosed.

Lakeside Manual Physical Therapy, Inc. and Mountainside Physical Therapy, Inc. intend to comply with all federal regulations under HIPAA. All staff members will uphold your privacy as directed by federal law.

Your rights are as follows:

- 1) **Right of Notice of Privacy Practices** which have been given to you today and you have been given the right to discuss these rights with our staff.
- 2) Right to request restrictions on certain uses and disclosures of your PHI.
- 3) Right to request confidential communications.
- 4) Right to access (inspect and obtain a copy of) your PHI. A nominal fee will be charged for record copying.
- 5) Right to request an amendment of your PHI.
- 6) Right to receive an accounting of disclosures of your PHI.

A healthcare provider may disclose your private health information under the following circumstances **WITHOUT** a written authorization from you;

- Reporting communicable diseases
- Reporting about victims of abuse
- Law enforcement purposes.

If you have any questions about our policy or your privacy please feel free to contact our office at 540-854-0367 or 540-987-9390.

In signing this form I agree that I have been adequately informed of Lakeside Manual Physical Therapy, Inc. and Mountainside Physical Therapy, Inc.'s privacy and disclosure practices. A copy of the federal privacy law has been made available for me to review and take home if I wish.

\_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Responsible Party Signature

\_\_\_\_\_  
Date