K-13 Physical Therapy & Sports Medicine, P.C.

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.

K-13 Physical Therapy & Sports Medicine, P.C. (K-13 PT) understands the importance of handling personal health information with care. We are committed to protecting the privacy of our clients' health information. State and federal laws require us to make sure that your health information is kept private.

When you receive physical therapy services at K-13 P.T., your personal health information may be released to K-13 P.T. and by K-13 P.T. This information is used and disclosed to coordinate your treatment, to obtain payment for your treatment and to assist in healthcare operations.

Federal law requires that we provide you with this Notice of Privacy Practices. THis Notice states our legal duties and privacy practices regarding your protected health information. It also states your rights under these laws with respect to the use and disclosure of your health information. K-13 P.T. is required by law to follow these terms of the Notice currently in effect.

Use and Release of Your Health Information

The sections below describe the ways K-13 P.T. uses and releases your health information. Yur health information is not shared with anyone who does not have a "need to know" to person one of these tasks below:

Treatment

We may use your health information or disclose it to third parties to coordinate and oversee your medical care. For example, we may disclose your health information to other doctors or health care providers who may be treating you.

Pavment

We may use your health information or disclose it to third parties to obtain payment for your treatment. For example, we may disclose your health information to your insurance company to determine whether a particular therapy service is covered under your health plan. In order to get payment for your physical therapy treatment, we may also need to disclose your protected health informationto your insurance company to demonstrate the medical necessity for the treatment, or as required by your insurance company for utilization review.

Health Care Operations

K-13 P.T. may use your health information to assist in every day work activities and to assure the quality of care. These activities may include:

- Quality improvement activities
- Employee reviews
- Supervised training programs
- Certifications, licensing, or credentialing activities
- Medical reviews
- Business planning
- To remind you of an appointment
- To inform you of your treatment options
- TO inform you of health services that may be of interest to you
- WEBPT

Other Permitted or Required Uses and Disclosures K-13 P.T. may also use or release your health information:

- When required by state or federal law
- When permitted for law enforcement purposes
- When permitted to be released to government authorities in cases of abuse, neglect, or domestic violence (in which case, you will be notified unless the notification would place you at risk of serious harm)
- When permitted for certain public health activities, such as disease control or public health investigations
- When permitted to be released for certain FDA investigations and activities, such as investigations of product defects or to permit product recalls, repairs, or replacements
- When permitted to prevent a serious threat to an individual or a community's health and safety
- When permitted by certain court proceeding (either judicial or administrative)
- When permitted for health oversight activities led by governmental agencies and authorized by law
- When permitted to be released about an inmate or correctional facility, or otherwise permitted for release in law enforcement custodial situations
- When information about a deceased individual is required by a coroner, medical examiner, law enforcement official or funeral director to carry out their legal duties
- When permitted to be released to cadaveric organ, eye or tissue donation and transplant organizations
- For research purposes when the research has been approved by an institutional review board that has reviewed proposals and established protocols to ensure the privacy of your health information
- When authorized by and to the extent necessary to comply with workers' compensation laws
- When permitted for purposes of providing you with treatment alternatives or other health-related benefits and services
- When permitted to be released to the Veterans Administration for determining if you are eligible for benefits
- When permitted to be released to Intelligence Agencies for national security
- When permitted to be released to the Department of State for foreign service reasons
- When permitted to be released to Government Agencies for protection of the President

In order to use or disclose your health information in the above ways, K-13 P.T. may have to follow additional State and Federal requirements. Also, in some cases K-13 P.T. may share your information with one of its "business associates", a person or company that provides certain services to K-13 P.T. In those cases, K-13 P.T. will have a contract with the business associate, as needed. This contract will require the business associate to confirm they will keep your health information private.

Uses and Disclousers of Your Health Information Without Authorization, But With Opportunity to Object

K-13 P.T. may disclose your health information to your family or to a close personal friend if it is directly relevant to the person's involvement in your care or payment for your care. We can also disclose your information when trying to locate family members concerning your location, condition, or death.

You may object to these disclosures. If you do not, or we can infer from the circumstances that you don't object, or we determine that it is in your best interests for us to make disclosure of information that is directly relevant to the person's involvement with your care, we may disclose your health information.

Your Rights Regarding Health Information About You

You have the following rights:

Right to Inspect and Copy

You have the right to look at and get a copy of health information that may be used to make decisions about your care. This includes medical, therapy and billing records, but does not include psychotherapy notes. There are other limited circumstances in which we may deny your request to inspect and copy under Federal and State law. If you are denied access to health infromation, you may request that denial be reviewed.

To inspect and copy your medical information, you must submit a written request to the Privacy Officer whose contact information is listed on the last page of this notice. If you request a copy of your information, we may charge you a fee for the cost of copying, mailing, and other costs incurred.

Right to Request a Restriction on Uses and Disclosures of Your Health Information

You may ask us to not use or disclose or use certain parts of your health information for the purposes of treatment, payment or health care operations. You may also request that we not disclose your health information to family members or friends who may be involved in your care, or for notification purposes. Your request must state the specific restriction requested and to whom you want the restriction to apply.

K-13 P.T. is not required to agree to a restriction that you may request. We will notify you if we deny your request to a restriction. If K-13 P.T. does agree to your request, it would be a violation to disclose your health information, unless it is needed to provide emergency treatment. Under certain circumstances, we may terminate our agreement to a restriction. You may request a restriction by contacting the Privacy Officer.

Right to Request to Receive Confidential Communications From us by Alternative Means or at an Alternative Location

You have the right to request that we communicate with you in certain ways. We will accommodate reasonable requests. We may condition this accommodation by asking you for information as to how payment will be handled or specification of an alternative address or other method of contact. We will not require you to provide an explanation for your request. Requests may be made in writing to our Privacy Officer.

Right to Have Your Physician Amend Your Protected Health Information

You may request an amendment of health information about you in a designated record set for as long as we maintain this information. In certain cases we may deny your request for an amendment. If we deny your request for amendment, you have the right to file a statement of disagreement with us and we may prepare a rebuttal to your statement and will provide you with a copy. Requests for amendment must be in writing and must be directed to our Privacy Officer. In this written request, you must provide a reason to support the requested amendments.

Right to Receive an Accounting

You have the right to request an accounting of certain disclosures of your health information. This applies to disclosures for purposes other than treatment, payment or health care operations. We are also not required to account for disclosures that you requested, disclosures that you agreed to by signing an authorization form, disclosures for a facility director, to friends or family members involved in your care, or certain other disclosures we are permitted to mke without your authorization. The request should specify the time period sought for the accounting. K-13 P.T. is not required to provide an accounting for disclosures that take place prior to February February 1, 2005. Accounting requests may not be made

for periods of time in excess of six years. We will provide the first accounting request during any 12-month period without charge. Subsequent accounting requests may be subject to a reasonable cost-based fee.

Right to Obtain a Paper Copy of This Notice

Upon request, we will provide a separate copy of this Notice even if you have already received a copy of this notice.

Our Duties

K-13 P.T. is required by law to maintain the privacy of your health information and to provide you with this Notice of our duties and privacy practices. We are required to abide by terms of this Notice as may be amended from time to time. We reserve the right to change the terms of this notice to make the new Notice provisions effective for all health information that we maintain. If K-13 P.T. changes its notice, we will provide a copy of the revised Notice by mail or in-person contact.

Complaints

You have the right to express complaints to K-13 P.T. and to the Secretary of Health and Human Services if you believe that your privacy rights have been violated. You may complain by contacting the Privacy Officer verbally or in writing, using the information below. We encourage you to express any concerns you may have regarding the privacy of your information. You will not be retaliated against in any way for filing a complaint.

Contact Person

K-13 P.T. contact person for all issues regarding patient privacy and your rights under the Federal Privacy Standards is the Privacy Officer. Information regarding matters covered by this Notice can be requested by contacting the Privacy Officer. Complaints against the practice can be mailed to the Privacy Officer by sending it to:

K-13 Physical Therapy and Sports Medicine, P.C. Attn: Privacy Officer 1507 Watrford Pkwy, Suite A St. Johns, MI 48879

The Privacy Officer can be contacted by telephone at 989-227-5404