

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.

Uses and Disclosures

Treatment: Your health information may be used by our physicians and staff members or communicated to other health care professionals for the purpose of evaluating your health, diagnosing medical conditions, and providing you with treatment.

Payment: Your health information may be used to obtain payment from your health plan, other sources of coverage such as an automobile insurer, or credit card companies that you may use to pay for services. For example, your health plan may request and receive information on dates of service, the services provided, and the medical condition for which you are being treated.

Health care operations: Your health information may be used to support the day-to-day activities and management of Canton Ophthalmology Associates. For example, information on the services you received may be used to support internal budgeting and financial reporting.

Law enforcement: Your health information may be given to law enforcement agencies, without your permission, to support government audits and inspections, to assist in law enforcement investigations, and to comply with government mandated reporting.

Public health reporting: Your health information may be disclosed to public health agencies as required by law. For example, our practice is required to report certain communicable diseases to the State of Ohio Department of Health.

Business associates: There are some services provided by Canton Ophthalmology Associates through our business associates (accountant, telephone confirmation service, etc.) which require us to disclose your health information so that they can perform the job that we have asked them to do. However, we require such businesses to sign an agreement with our office to not disclose this information.

Notification/communication with family: We may use information to notify or assist us in notifying a family member, personal representative or other person responsible for your care.

Research: Based on applicable law, we may disclose information to researchers when their research has been approved to ensure the privacy of your health information.

Funeral directors, coroner and medical examiner: Consistent with applicable law, we may disclose health information to the above to help them carry out their duties.

Organ procurement organizations: We may disclose health information to organ procurement organizations or other entities obtaining, banking or transporting of organs for the purpose of tissue donations and transplants.

Other used and disclosures require your authorization: Disclosure of your health information or its use for any purpose other than those listed above requires your written authorization. If you change your mind after authorizing a use or release of your information, you may submit a written request to change your authorization. However, your decision to change the authorization will not affect or undo any information that was given out before you notified us of this decision.

Additional Uses of Information

Appointment reminders: Canton Ophthalmology Associates utilizes an automated telephone system using your name, address, and phone number; the name of your scheduled treating physician; and the time and place of your scheduled appointment(s), for the limited purpose of contacting you to notify you of a pending appointment or other healthcare related communication. Canton Ophthalmology Associates may disclose to third parties who answer your phone limited protected health information regarding pending appointments and/or leave a reminder message on your voice mail system or answering machine.

In addition, Canton Ophthalmology Associates mails postcards to you to remind you of upcoming appointments or an appointment that you need to make. These postcards include your name, your appointment date or a reminder to make an appointment, and the name of the doctor you will be seeing.

Information about treatments: Your health information may be used to send you information on the treatment and management of your medical condition that you may find to be of interest. We may also send you information describing other health-related goods and services that we believe may interest you.

Individual rights: You have certain rights under the federal privacy standards. These include:

- the right to request restrictions on the use and disclosure of our protected health information.
- the right to receive confidential communications concerning your medical condition and treatment.
- the right to inspect and copy your protected health information.
- the right to request an amendment or submit corrections to your protected health information.
- the right to receive an accounting of how and to whom your protected health information has been disclosed.
- the right to receive a printed copy of this notice.

Canton Ophthalmology Associates' duties: We are required by law to protect your health information and to provide you with this notice of privacy practices.

Right to revise privacy practices: As permitted by law, we reserve the right to change or modify our privacy policies and practices. These changes in our policies and practices may be required by changes in federal and state laws and regulations. We will provide you with a notice on your next office visit of any changes.

Requests to inspect protected health information: As permitted by federal regulation, we require that requests to inspect or copy protected health information be submitted in writing. You may obtain a form to request access to your records by contacting our Privacy Officer.

Contact person for questions, requests, complaints: If you would like to submit a question, request or complaint about our privacy practices, or obtain additional information about our privacy practices, you can do so by sending a letter with your concerns to the person listed below. There will be no type of penalty for filing a request or complaint.

Privacy Officer
Canton Ophthalmology Associates, Inc.
2600 Tuscarawas St. W Suite 200
Canton OH 44708-4693
Phone: 330-456-0047

Effective date: This notice is effective on or after April 14, 2003.