

THIS NOTICE DESCRIBES HOW INDIVIDUALLY INDENTIFIABLE HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION.

#### PLEASE REVIEW THIS DOCUMENT CAREFULLY.

**Therapeutic Innovations, Inc.** is required by law to maintain the privacy of your Protected Health Information (PHI) and to provide you with notice of its legal duties and privacy practices with respect to you PHI. If you have questions about any part of this notice or if you want more information about the privacy practices at Carolina Therapy, please contact:

Privacy Office: <u>Therapeutic Innovations</u>
Address: <u>106 E Victoria Court Ste. D ♦ Greenville, NC 27858-5708</u>
Phone: <u>252.321.6001</u>

EFFECTIVE DATE OF THIS NOTICE:

#### How Therapeutic Innovations May Use or Disclose Your Protected Health Information

Therapeutic Innovations, Inc. collects health information from you and stores it is a chart and/or on a computer. This is your medical record. The medical record is the property of Trinity Rehab, but the information in the medical record belongs to you. STS protects the privacy of your PHI. The law permits Carolina Therapy Sevices to use or disclose your PHI for the following purposes:

- Evaluation and Treatment. Therapeutic Innovations will use and disclose your PHI while providing, coordinating and managing your health care. For example, information obtained by a therapist or other member of your healthcare team will be recorded in your record and use to determine the course of treatment that should work best for you. Your therapist will put in your record his or her expectations and plan of treatment. Members of your healthcare team will record the course of treatment and their observations. We may also provide other healthcare providers with your information to assist them in treating you.
- 2. Payment. Therapeutic Innovations will use and disclose your PHI to obtain or provide compensation or reimbursement for providing your health care services. For example, we may send a bill to you or your health plan. The information on or accompanying the bill may include information that identifies you, as well as your diagnosis, treatment and supplies used. As another example, we may disclose information about you to your health plan so that the health plan may determine your eligibility for payment for services provided.
- 3. <u>Regular Health Care Operations</u>. Therapeutic Innovations will use and disclose your health information to deal with certain administrative aspects of your health care and to manage our business efficiently. For example: members of our staff may use information in your health record to assess the quality of care and outcomes in your case and others like it. This information will then be used in an effort to improve the quality and effectiveness of the services we provide.
- 4. <u>Business Associates</u>. There are some services provided in our organization through contracts with business associates. Therapeutic Innovations may disclose your health information to our business associates so that they can perform the job we have asked them to do. However, we require the business

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associate to take precautions to protect your PHI and meet the same requirements that are met by Trinity Rehab.

- 5. <u>Notification and Communication With Family</u>. Therapeutic Innovations may disclose your health information to notify or assist in notifying a family member, your personal representative or another person responsible for your care about your location, your general condition and your therapeutic needs. If you are able and available to agree or object, we will give you the opportunity to object prior to making this notification. If you are unable or unavailable to agree or object, our health professionals will use their best judgment in communication with your family and others.
- 6. Required By Law. Therapeutic Innovations may use and disclose your PHI as required by law.
- 7. <u>Public Health</u>. As required by law, Therapeutic Innovations may disclose your PHI to public health authorities for purposes related to: preventing or controlling disease, injury or disability, reporting child abuse or neglect, reporting domestic violence and reporting disease or infection exposure.
- 8. <u>Health Oversight Activities</u>. Therapeutic Innovations may disclose your PHI to health agencies during the course of audits, investigations, inspections, licensure surveys and other such proceedings.
- 9. <u>Judicial and Administrative Proceedings.</u> Therapeutic Innovations may disclose your PHI in the course of any administrative or judicial proceeding, as required by law.
- 10. <u>Law Enforcement</u>. Therapeutic Innovations may disclose your PHI to a law enforcement official for purposes such as identifying or locating a suspect, fugitive, material witness or missing person, complying with a court order or subpoena and other law enforcement purposes.
- 11. <u>Research</u>. Therapeutic Innovations may disclose your PHI to researchers conducting research that has been approved by an Institutional Review Board.
- 12. <u>Public Safety</u>. Therapeutic Innovations may disclose your PHI to appropriate persons in order to prevent or lessen a serious and imminent threat to the health or safety of a particular person or the general public.
- 13. <u>Worker's Compensation</u>. Therapeutic Innovations may disclose your PHI as necessary to comply with Worker's Compensation laws.
- 14. <u>Marketing</u>. Therapeutic Innovations may contact you to provide appointment reminders or to give you information about your treatments or health related service that may be of interest to you.
- 15. <u>Change of Ownership</u>. In the event that Therapeutic Innovations is sold or merged with another organization, you PHI will become the property of the new owner.

#### When Therapeutic Innovations May Not Use or Disclose Your Protected Health Information.

Except as described in this Notice of Privacy Practices, Therapeutic Innovations will not use or disclose you PHI without your written authorization. If you do authorize Therapeutic Innovations to use or disclose your PHI for another purpose, you may revoke your authorization in writing at any time.

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#### **Your Protected Health Information Rights**

- 1. You have the right to request restrictions on certain uses and disclosures of your PHI. Therapeutic Innovations is not required to agree to the restriction that you request.
- 2. You have the right to receive your PHI through a reasonable alternative means or at an alternative location. For instance, you may request that Therapeutic Innovations only contact you at work or by mail. To make such a request, you must write to us at the address below and tell us how or where you wish to be contacted.
- 3. You have the right to inspect and copy you PHI. You must submit your request in writing to the address below through our Privacy Officer. If you request a copy of your PHI, Therapeutic Innovations may charge you a fee for the cost of copying, mailing and supplies. In certain circumstances, we may deny your request to inspect or copy your PHI. If you are denied access to your PHI, you may request that the denial be reviewed. Another licensed health care professional will then review your request and the denial. The person conducting the review will not be the person who denied your request. Therapeutic Innovations will comply with the outcome of the review.
- 4. You have a right to request that Therapeutic Innovations amend your PHI that is incorrect or incomplete. Therapeutic Innovations is not required to change you PHI and will provide you with information about the Therapeutic Innovations denial and how you can disagree with and appeal the denial.
- 5. You have a right to receive an accounting of disclosures of your PHI made by Therapeutic Innovations, except that Therapeutic Innovations does not have to account for the disclosures described in Section I of this Notice of Privacy Practices, parts 1 Treatment, 2 Payment, 3- Health Care Operations and 4-Business Associates.
- 6. You have a right to a paper copy of this Notice of Privacy Practices.

### **Changes to This Notice of Privacy Practices**

Therapeutic Innovations reserves the right to amend this Notice of Privacy Practices at any time in the future and to make the new provisions effective for all information that it maintains, including information that was created or received prior to the date of such amendment. Until such amendment is made, Therapeutic Innovations is required by law to comply with this Notice.

Any revision to our Privacy Practices will be described in a revised Notice that will be posted prominently in our offices and clinic.

#### **Complaints**

Complaints about this notice of Privacy Practices or how Therapeutic Innovations handles your PHI should be directed to:

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If you are not satisfied with the manner in which this office handles a complaint, your may submit a formal complaint to:

Department of Health and Human Services Office for Civil Rights Hubert H. Humphrey Building 200 Independence Avenue, S.W. Room 509F HHH Building Washington, D.C. 20201

You may also address your complaint to one of the regional Offices for Civil Rights. As list of these offices can be found online at <a href="http://www.hhs.gov/ocr/regmail.html">http://www.hhs.gov/ocr/regmail.html</a>.

#### More Information or Further Explanation:

If you would like to have a more detailed explanation of these rights or if you would like to exercise one or more of these rights or if you have any questions related to this Notice, please contact:

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