



Notice of Privacy Practices (NPP)

This notice describes how your health information may be used and disclosed by Agasar Family WellCare at Inner Spa. It also explains how you can access this information yourself. This notice is effective January 1, 2017, and replaces earlier versions.

Agasar Family WellCare at Inner Spa
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At Agasar Family WellCare at Inner Spa, we want you to understand our policies and procedures, which have been developed to ensure your health information is protected. Our office and employees are subject to state and federal laws regarding confidentiality of your health information. We will use and communicate the same only for the purpose of providing first-rate treatment, obtaining payment, and conducting health care operations. Your health information will not be used for other purposes unless we have asked for and received your written permission, which will be in effect for 12 months if signed without an end date; you may revoke this authorization at any time by submitting a notice in writing.

How your health information may be used

To provide treatment: We will use your health information within our office to provide you with the best health care possible. This may include review and access by our doctors, therapists, assistants, administrative staff, or other personnel providing you treatment in our practice.

To obtain payment: We may use your health information when completing invoices to collect payment on treatment you have received in our practice. We may also do this with regards to filling out insurance forms, both paper and electronically. We assure you that we will only work with companies that follow state and federal HIPPA regulations.

To conduct health care operations: Your health information may be used during performance evaluations of our staff as some of our best teaching opportunities grow from experiences patients have while receiving care in our practice. As a result, patient health information may be used in training programs for interns, associates, therapists, administrative and clinical staff. It is also possible that in the event of an audit by insurance companies or government-appointed agencies, your health information may be accessed as part of their quality assurance and compliance review. We will never share your information for marketing purposes.

Abuse or neglect: We will notify government authorities if we believe a patient is the victim or perpetrator of abuse, neglect or domestic violence. We will make the disclosure only when we are compelled by our ethical judgment, when authorized by the law or with the patient's agreement.

For law enforcement: As permitted or required by local, state or federal law, we may disclose your health information to a law enforcement official for certain purposes, including if you are the victim of a crime or in order to report a crime.

Public health and national security: We may be required to disclose to federal officials or military authorities health information necessary to complete an investigation related to public health or national security. Health information could be important to the government if they believe it can lead to the control or prevention of an epidemic.

Family, friends and caregivers: We may share your health information with those you tell us assist you in your health, daily care, transportation or finances. We will ask you for your permission to do so first. In the case of an

emergency where you are unable to tell us what you want, we will use our very best judgment when sharing your health information only when important to those participating in providing you care.

Medical research. Your health information may be important to furthering research and the development of new knowledge and treatment. Formal review and study of health histories as part of a research study will happen only under the ethical guidance and by an Institutional Review Board (IRB). In these cases, your information will be stripped of personal identifiers (i.e. name, DOB).

Patient reminders. Because we believe that following a care plan is important to your overall well-being, we will remind you of a scheduled appointment or contact you to arrange an appointment. Additionally, we may contact you to follow up on your care plan or inform you of treatment options that could improve your wellness. These communications are an important part of our philosophy of partnering with each patient to ensure they are receiving the best care we can provide. Such communications may include postcards, letters, phone calls, text messages, and/or email reminders. You are welcome to opt out of any or all of these communications.

Patient Rights

Inspect and copy your health information. You have the right to read, review and receive copies of your health care information, including x-rays, complete chart of accounts and billing records. If you would like a copy of your health information, please let us know in writing. We may charge you a reasonable fee to duplicate and assemble your copy.

Amend your health information. You have the right to ask us to update or modify your records if you believe your health information is incorrect or incomplete. In order to modify your records, you must submit a written request accompanied by your reason for requesting the changes. Please note that we can only modify records created in our practice. We reserve the right to deny any request, in which case you will receive in writing our reasons for denial within 60 days of your original request.

Documentation of health information. You have the right to ask us for a description of how your health information was used by our office for any other reason than treatment, payment or health insurance reasons. Please let us know in writing if you would like this information; we may charge a reasonable fee for this request.

Request a copy of this notice. You have the right to obtain a copy of this original NPP directly from our office at any time. Paper copies are available at the front desk or from any team member. We can also provide a copy by email upon request, or you can print it from our web site. We are required to practice the policies and procedures described in this NPP, but we reserve the right to change the terms of our Notice. If we change our privacy practices, we will supply the revised Notice to our active patients.

You have the right to express complaints to our HIPPA Security Officer, Gerald J. Agasar, DC at 215.550.6502 or drjerry@agasarfamilywellcare.com You may also contact the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Ave. SW, Washington, DC 20201, calling 1-877-696-3775 or visiting www.hhs.gov.

Agasar Family WellCare at Inner Spa, along with all of our officers, agents and employees, have reviewed, understand and will adhere to this policy. There will be no tolerance for any violations of this NPP. Violation of this policy is grounds for disciplinary actions, up to and including termination of employment and criminal or professional sanctions.