

# THIS NOTICE DESCRIBES HOW INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW THIS NOTICE CAREFULLY.

## Introduction

At Milwaukee Nephrologists, S.C., we are committed to treating and using your protected health information about you responsibly. This Notice of Privacy Practices describes the personal information we collect, and how and when we use or disclose that information. It also describes your rights as they relate to your protected health information. This notice is effective January 1, 2014, and applies to all protected health information as defined by federal health regulations.

## Understanding Your Health Record/Information

Each time you visit Milwaukee Nephrologists, S.C., a record of your visit is made. Typically, this record contains your symptoms, examination, test results, diagnoses, treatment, and a plan for future care or treatment. This information often referred to as your health or medical record, serves as a:

- Basis for planning your care and treatment
- Means of communication among the many health professionals who contribute to your care
- Legal document describing the care you received,
- Means by which you or a third-party payer can verify that services billed were actually provided
- A tool in educating health professionals
- A source of data for medical research
- A source of information for public health officials charged with improving the health of this state and the nation
- A source for our planning and marketing
- A tool with which we can assess and continually work to improve the care we render and the outcomes we achieve

Understanding what is in your record and how your health information is used helps you to: ensure its accuracy, better understand who, what, when, where, and why others may

access your health information, and make more informed decisions when authorizing disclosure to others.

## Your Health Information Rights

Although your health record is the physical property of Milwaukee Nephrologists, S.C., the information belongs to you. You have the right to:

- Obtain a paper copy of this notice upon request
- Obtain a copy of this notice on our website [www.milwaukeeephrologists.net](http://www.milwaukeeephrologists.net)
- Inspect and obtain a copy of your health record as provided for in 45 CFR 164.524
- Request an amendment to your record as provided in 45 CFR 164.528
- Obtain an accounting of disclosures of your health information as provided in 45 CFR 164.528
- Request communications of your health information by alternative means or at alternative locations
- Request a restriction on certain uses and disclosures of your health information as provided in 45 CFR 164.522
- Revoke your authorization to use or disclose your health information except to the extent that action has already been taken

## Our Responsibilities

Milwaukee Nephrologists, S.C. is required to:

- Maintain the privacy of your health information
- Provide you with this notice as to our legal duties and privacy practices with respect to information we collect and maintain about your care
- Abide by the terms of this notice
- Notify you if we are unable to agree to a requested restriction
- Accommodate reasonable requests you may have to communicate your health information by alternative means

We reserve the right to change our practices and to make the new provisions effective for all protected health information we maintain. Should our information practices change, we will mail a revised notice to the address you've supplied us, or if you agree, we will email the revised notice to you.

We will not use or disclose your health information without your authorization, except as described in this notice. We will also discontinue to use or disclose your health information after we have received a written revocation of the authorization according to the procedures included in the authorization.

## For More Information or to Report a Problem

If you have questions or would like more information, you may contact the practice's Privacy Officer at (414) 383-7744.

If you believe your privacy rights have been violated, you can file a complaint with the practice's Privacy Officer, or with the Office of Civil Rights. There will be no retaliation for filing a complaint with either the Privacy Officer or Office of Civil Rights. Information to contact OCR is listed below.

### *Office of Civil Rights*

U.S. Department of Health and Human Services  
200 Independence Avenue, S.W.  
Room 509F, HHH Building  
Washington, D.C. 20201  
800-368-1019 or [www.hhs.gov/ocr](http://www.hhs.gov/ocr)

## Examples of Disclosure for Treatment, Payment, and Healthcare Operations

*We will use your health information for treatment.*

For Example: Information obtained by a nurse, physician, or other member of your healthcare team will be recorded in your record and used to determine the course of treatment that should work best for you. Your physician will document in your record his or her expectations of the members of your health care team. Members of your health care team will record the actions they took and their observations. In that way, the physician will know you are responding to treatment

We will also provide your physician or a subsequent health care provider with copies of various reports that should assist him or her in treating you on an on-going basis.

*We will use your health information for payment.*

For Example: A bill may be sent to you or a third-party payer. The information on or accompanying the bill may include information that identifies you, as well as your diagnoses, procedures, and supplies used.

*We will use your health information for regular health care operations.*

For Example: Members of the medical staff, the risk or quality improvement manager, or members of the quality improvement team may use information in your health record to assess the care and outcomes of your case and others like it. This information will then be used in an effort to improve the quality and effectiveness of the healthcare and service we provide.

#### **Other Examples:**

*Business Associates:* There are some services provided in our organization through contracts with business associates. Examples include emergency room services, radiology services, laboratory services, and may include medical record copy services. When these services are contracted, we may disclose your health information to these business associates so they can perform the task requested and may bill your third-party payer for services rendered. All business associates, and any subcontractors, are required to appropriately safeguard your health information.

*Notification:* We may use or disclose information to notify or assist in notifying a family member or designated individual you have chosen about your care and condition.

*Communication with family:* Health professionals, using their best judgment, may disclose to a family member, other relative, or designated individual you have chosen, health information relevant to that person's involvement in your treatment or payment of treatment.

*Research:* We may disclose information to researchers when their research has been approved by an institutional review board that has reviewed the research proposal and established protocols to ensure the privacy of your health information.

*Funeral directors:* We may disclose your health information to funeral directors consistent with applicable law to carry out their duties.

*Organ procurement organizations:* Consistent with applicable law, we may disclose your health information to organ procurement organizations or other entities engaged in the procurement, banking, or transplantation of organs for the purpose of tissue donations or transplant.

*Marketing:* We may contact you to provide appointment reminders or information about treatment alternatives or other health related benefits and services that may be of interest to you.

*Fund Raising:* We may contact you as part of a fund raising effort.

*Food and Drug Administration (FDA):* We may disclose your health information to the FDA in the event of adverse events with respect to food, supplements, product and product defects, or post marketing surveillance information to enable product recalls, repairs, or replacement.

*Workers compensation:* We may disclose your health information to the extent authorized as necessary to comply with laws relating to workers compensation or other similar programs established by law.

*Public Health:* We may disclose your health information to public health or legal authorities charged with preventing or controlling disease, injury, or disability.

*Law Enforcement:* We may disclose your health information for law enforcement purposes as required by law or in response to a valid subpoena.

Federal law makes provision for your health information to be released to an appropriate health oversight agency, public health authority or attorney, provided that a work force member or business associate believes in good faith that we have engaged in unlawful conduct of that otherwise violated professional or clinical standards and are potentially endangering one or more patients, workers or the public.

## NOTICE OF PRIVACY PRACTICES

FOR

Milwaukee Nephrologists, S.C.

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