



ORTHOPAEDIC ASSOCIATES
of KENTUCKIANA, P.L.L.C.

3605 Northgate Court, Suite 202, New Albany, Indiana 47150

Notice of Privacy Practices

Effective 1/1/2013

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.

If you have any questions about this notice, please contact the Orthopaedic Associates of Kentuckiana, PLLC., Privacy Officer at (502) 585-4376.

PURPOSE

Orthopaedic Associates of Kentuckiana, PLLC. (OA), its team members, medical staff, employed physicians, residents, fellows, students, contractors and volunteers follow the privacy practices described in this Notice of Privacy Practices (Notice). This Notice describes the ways in which we may use and disclose your health information within OA and with other entities. We also describe your rights and certain obligations we have regarding the use and disclosure of your health information. OA participates in an Organized Health Care Arrangement (OHCA) with its Medical Staff and will share your health information with the arrangement's participants to carry out treatment, payment or health care operations related to the OHCA. OA facilities are committed to protecting your health information in a confidential manner.

WHO WILL FOLLOW THIS NOTICE?

OUR LEGAL RESPONSIBILITIES

OA is required by law to protect the privacy of your health information that can identify you, inform you about our legal duties and privacy practices with respect to your health information, and follow the terms of this Notice. This Notice applies to all of your health information held by OA.

- OA must abide by the terms of this Notice.
- OA must notify you if we are unable to agree to a restriction that you request about the use and disclosure of your protected health information.
- OA must accommodate reasonable requests you may have to communicate health information by alternative means or at alternative locations.
OA will not use or disclose your health information without your authorization, except as described in this Notice.

REVISIONS TO THIS NOTICE

OA may change its Notice at any time and make the new provisions effective for all health information OA maintains. Upon your request, OA will provide you with information about how to obtain a revised Notice of Privacy Practices by accessing our web site, www.oadocs.com, by calling the OA Privacy Officer at (502) 585-4376 to request a revised copy be mailed to you or by requesting one at the time of your next visit.

HOW OA WILL USE AND DISCLOSE YOUR HEALTH INFORMATION

Treatment, Payment and Health Care Operations (TPO). OA will use or disclose your health information for treatment, to obtain payment for treatment and for health care operations.

The examples below are not meant to be exhaustive, but describe common types of disclosures OA may make.

Examples of Uses and Disclosures for Treatment OA will use and disclose your health information to:

- Anyone involved in your treatment, including physicians, nurses, therapists, pharmacists, radiologists, discharge planners, dietitians, laboratory and others who need access to your health information to assist in your diagnosis and treatment.
- Anyone necessary to provide or manage your health care treatment, including the coordination or management of your care with a provider outside OA, such as a home health agency that is evaluating your need for home health services.
- The physician who referred you to OA or who will provide follow-up care to you after you are discharged from OA.

Examples of Uses and Disclosures for Payment OA will use and disclose your health information to:

- Obtain payment for the services and treatment you receive.
- Communicate with your health insurance plan to obtain approval for the health care services OA recommends for

