Health and Wellness Chiropractic Center, P.C. HIPAA Notice of Privacy Practices

We keep you Personal Health Information (PHI) safe:

Dr. Tomalin, and all staff members at HWCC appreciate your business and your confidence in us. We value you as a patient and want you to know that we have complied with the federal Health Insurance Portability and Accountability Act (HIPAA). This act requires us to carefully protect any personal health information you give us. We are committed to the safekeeping of your records and any information necessary for us to treat you, bill on your behalf, and/or plan the future of this business. Therefore, we limit access to your records and your personal information to employees here to use for treatment, billing, and business operations, including, of course insurance companies who may need your information in order to pay for your care.

We protect your confidentiality:

In addition, HWCC maintains physical, electronic and procedural safeguards that comply with the above regulations to protect your PHI. That means we do not sell or provide your information to anyone who does not need it for the above-mentioned reasons: treatment, billing or business operations internal to this business. It also means we secure our office and records area and use password-protected computer systems. Our employees also sign confidentiality agreements.

Your part in this:

We ask you to sign this one-page acceptance/acknowledgment of our HIPAA Notice of Privacy Practices. The notice itself is ten pages long and is available to you in full by asking the front office person to see it.

Because we practice a uniquely open style of chiropractic care we also request your permission to:

- Use your address, phone number and clinical records to contact you with appointment reminders, missed appointment notifications, birthday cards, postcards, newsletters, thank you letters, holiday related cards, information about treatment alternatives or other health related information.
- Contact you by phone and leave a phone message on answering machine or voice mail.
- Treat you in an open room where other patients are also being treated. Please be aware that
 other persons in the office may overhear some of your PHI information during the course of
 care. If you wish to speak with a doctor in private, the doctor will provide a room for these
 conversations.
- Use your name on a referral board, welcome board or 'optimal health' display in the office. Post your picture and your children's picture(s) on the wall with their name(s) and ages.
- Use your personal testimonial and/or x-rays as a teaching tool for other patients or potential patients to view.
- Allow your spouse or significant other in the report of findings room while discussing your PHI.

Thank you for your business and trust in us! If you have questions, please ask!

I acknowledge receipt of this HIPAA Privacy
Information:
Patient Signature
Today's Date