



Notice of Privacy Practices

BodyWorks Physical Therapy is committed to protecting the confidentiality of your health information. We have policies and safeguards in place to insure your privacy. BodyWorks Physical Therapy is also required by state and federal laws to protect the confidentiality of your health information.

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED, AND HOW YOU CAN ACCESS THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

The confidential health information that we collect as we deliver care or services to you is called “protected health information”. We can use and disclose your protected health information:

- ❖ To provide treatment and to help us coordinate services among personnel and with others involved in your care such as family members, your pharmacist, suppliers of medical equipment and your physician; or we can use your information to recommend an alternative treatment to you or to notify you of a service such as availability of flu shots.
- ❖ To obtain payment such as including your health information on invoices to collect payment. For example, we may be required by your insurer to provide information regarding your health so that they will pay you or BodyWorks Physical Therapy. We may also need to obtain prior approval from your insurer and explain your need for therapy services and the care or services that we will provide to you.
- ❖ For health care operations such as using your protected health information to evaluate and improve the quality of the services or to write new guidelines to provide more effective care; to conduct supervision of employees or evaluate their performance; to train our employees or student therapists to determine your satisfaction with our services; for general business planning and development; or for business management and general administrative activities.

You also have the following rights regarding the use and disclosure of your protected health information:

- ❖ You can request that we restrict its use and disclosures—such as not sharing this information with a particular family member. However, we are not required to agree with every restriction and we may end such a restriction if we believe it puts you or your health at risk. You can also decide to end a restriction at any time.
- ❖ You can request that communication between you and BodyWorks Physical Therapy be provided to you in another way. For example, we can send all of your written communication to your daughter’s address, if you ask us to do so.
- ❖ You can ask to inspect and copy your protected health information and you can request to change it.
- ❖ You also have the right, with limited exceptions under federal regulation to receive an accounting of the disclosures we have made of your protected health information other than those used for treatment, payment or operations.