

# NOTICE OF PRIVACY PRACTICES

**This Notice describes how your protected health information (PHI) may be used and disclosed and details your right to access and restrict access to this information**

## PLEASE REVIEW CAREFULLY

Apple Valley Chiropractic and Rehab is required by law to maintain the privacy of your health information and to provide you with notice of our legal duties and privacy practices with respect to health information. We are required to abide by the terms of the Notice currently in effect, though we reserve the right to amend the terms of this notice and to make the new notice provisions effective for all PHI that it maintains. Upon your request, we will provide you with any revised Notice of Privacy Practices or you may obtain a copy by accessing our website at [www.applevalleychiropractic.com](http://www.applevalleychiropractic.com), sending an email to [info@applevalleychiropractic.com](mailto:info@applevalleychiropractic.com), or asking for one at your next appointment.

This Notice of Privacy Practices and Policies outlines our practices, policies and legal duties to maintain confidentiality and protect against prohibited disclosure of protected health information (“PHI”) under the privacy regulations mandated by the Health Insurance Portability and Accountability Act (“HIPAA”) and further expanded by the Health Information Technology for Economic Clinical Health Act (“HITECH”).

PHI includes your demographic information such as name, address, telephone number, and family; past, present, or future information about your physical or mental health or condition; and information about the medical services provided to you, including payment information, if any of that information may be used to identify you. Your PHI may be maintained by us electronically and/or on paper.

This Notice describes uses and disclosures of PHI to which you have consented, that you may be asked to authorize in the future, and that are permitted or required by state or federal law. Also, it advises you of your rights to access and control your PHI.

We regard the safeguarding of your PHI as an important duty. The elements of this Notice and any authorizations you may sign are required by state and federal law for your protection and to ensure your informed consent to the use and disclosure of PHI necessary to support your relationship with us.

If you have any questions about this Notice of Privacy Practices, please contact Apple Valley Chiropractic and Rehab at [info@applevalleychiropractic.com](mailto:info@applevalleychiropractic.com) or via mail, 7600 147<sup>th</sup> St. W. Ste. 100, Apple Valley, MN 55124.

### **Safeguarding Your PHI Within Our Practice**

We have in place appropriate administrative, technical, and physical safeguards to protect and to secure the privacy and security of your PHI. We orient our staff to the regulations and policies developed to protect the privacy of your PHI, and review their obligation to maintain privacy and security annually. We hold medical records in a secure area within our clinics, and our electronic medical record system is monitored and updated to address security risks in compliance with the HIPAA Security Rule. Only staff members who have a legitimate “need to know” are permitted access to your medical records and other PHI. Our staff understands the legal and ethical obligation to protect your PHI and that a violation of this Notice of Privacy Practices and Policies may result in disciplinary action in accordance with our compliance policies.