

## NOTICE OF PRIVACY PRACTICES

It is the goal of NASA PEDIATRICS, Dr. Idalia Rivera-Matos and staff to provide the highest quality care services in accordance with all pertinent federal and state laws. The Practice will take reasonable steps to ensure conformity with pertinent laws and regulations. We are committed to providing security and privacy for all protected health information obtained during your course of care. The Health Insurance Portability and Accountability Act (HIPAA) requires that we disclose certain information to our patients regarding the privacy of their medical information and records as well as our policies regarding the treatment of this information. Your medical information, records, and documents are of highly confidential nature. Except as required or authorized by law, they shall not be disclosed to, or discussed with, anyone not employed by or affiliated with The Practice without the permission of The Practice or the patient, as appropriate. HIPAA provides certain rights to patients with regard to the “protected health information.” These rights include: the right to our Notice of Privacy Practices, the right to inspect and to obtain copies of your medical records, the right to amend/append your medical records, the right to authorize certain non-treatment disclosures (employer, life insurance, fund raising, research), the right to request restrictions on the use of your medical records, the right to request alternative channels of communication, and the course of action should you feel your right have been impeded.

## AVISO SOBRE PRACTICAS DE PRIVACIDAD

Es la meta de NASA PEDIATRICS, Dra. Idalia Rivera-Matos y personal proveer el mas alto nivel de cuidado medico en conjunto con todas las leyes federales y estatales pertinentes. Nuestra Practica tomara pasos razonables para asegurar la conformidad con leyes y regulaciones pertinentes. Estamos comprometidos a proveer seguridad y privacidad para toda informacion medica protegida durante su curso de cuidado. La Health Insurance Portability and Accountability Act (HIPAA) require que avisemos cierta informacion a nuestros pacientes sobre la privacidad de su informacion medica y expedientes asi como nuestras polizas sobre como tratamos esta informacion. Su informacion medica, expedientes, y documentos son de alta naturaleza confidencial. Excepto como requerido o autorizado por ley, no deben ser revelados, o discutidos con nadie no empleado o afiliado con la practica sin el permiso de nuestro personal o el paciente, como apropiado. HIPAA provee ciertos derechos a los pacientes en respeto a “informacion medica protegida” mejor conocida como “PHI Protected Health Information”. Estos derechos incluyen: el derecho a nuestro Aviso de Practicas de Privacidad, el derecho de obtener copias de su archivo medico, el derecho de hacer cambios a su expediente medico, el derecho a autorizar ciertas divulgaciones no directamente relacionadas al tratamiento (empleo, aseguranza de vida, recaudaciones, o investigaciones), el derecho a pedir restricciones al uso de su expediente medico, el derecho a pedir otros metodos de comunicacion, o curso de accion si siente que su derecho a sido impedido.