

Patient Privacy Information

At Dr. Stephen J. Hoenig's office, your privacy is a priority.

We follow strict federal and state guidelines to maintain the confidentiality of your medical (protected health) information.

Protected Health Information

Protected health information (PHI) is any information about your past, present or future health care or payment for that care that could be used to identify you.

Members of our workforce and our business associates may only access the minimum amount of protected health information that they need to complete their assigned tasks.

Use and Disclosure of PHI

When you visit our office, we use and disclose your protected health information to treat you, to obtain payment for services and to conduct normal business known as health care operations. We may also share information with a contracted business associate who must meet our privacy requirements. Examples of how we use and disclose your information include:

- **Treatment** – We document each visit and/or admission. This documentation may include your test results, diagnoses and medications, and your response to medication or other therapies. This allows your doctors, nurses and other clinical staff to provide the best care to meet your needs.
- **Payment** – We document the services and supplies you receive at each visit or admission so that you, your insurance company or another third party can pay us. We may tell your health plan about upcoming treatment or services that require prior approval.
- **Health Care Operations** – Medical information is used to improve the services we provide, to train staff and students, and for business management, performance improvement and customer service.

We may also use information to:

- Recommend treatment alternatives
- Tell you about health benefits and services
- Communicate with other business associates for treatment, payment or health care operations
- Send appropriate reminders
- Communicate with family and friends involved in your care with your permission

There are limited times when we are permitted or required to disclose medical information without your signed permission. These situations include the following:

- For public health activities such as tracking diseases or medical devices
- To protect victims of abuse or neglect
- For federal and state health oversight activities such as fraud investigations
- For judicial or administrative proceedings
- If required by law or for law enforcement
- To coroners, medical examiners and funeral directors
- For organ donation
- To avert serious threat to public health or safety
- For specialized government functions such as national security and intelligence
- To workers' compensation if you are injured at work
- To a correctional institution if you are an inmate
- For research following strict review to ensure protection of information

Other uses and disclosures not previously described may only be done with your signed authorization. You may revoke your authorization, in writing, at any time.