



PRIVACY POLICY STATEMENT

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

Privacy Officer: Practice Manager 213-223-1100

Purpose: The following privacy policy is to ensure the California Cardiovascular Institute (CCVI) complies with requirements of the Health Insurance Portability & Accountability Act of 1996 (HIPAA) as well as California privacy protection laws and regulations. Protection of patient privacy is of paramount importance to CCVI. Violations of any of these provisions knowingly or unknowingly will result in disciplinary action including termination of employment and possible referral for criminal prosecution.

Notice of Privacy Practices

This Notice of Privacy Policy (NPP) will be provided to patients at their first encounter and all uses and disclosures of protected health information (PHI) will be in accord with CCVI's notice of privacy practices, CCVI will have a copy of the most current NPP available for review and for distribution at the reception desk.

Assigning Privacy and Security Responsibilities

Specific individuals at CCVI are assigned the responsibility of implementing and maintaining the HIPAA Privacy and Security Rules' requirements. At a minimum, CCVI will designate the Practice manager as the privacy official.

Deceased Individuals

CCVI privacy protections extend to information concerning deceased individuals.

Minimum Necessary use and Disclosure of Protected Health Information (PHI)

CCVI will ensure that all routine and recurring uses and disclosures of PHI (except for uses or disclosures made for treatment purposes; or as authorized by the patient; or as required by law for HIPAA compliance) such uses and disclosures of PHI must be limited to the minimum amount of information needed to accomplish the purpose of disclosure.

Verification of Identity

CCVI will ensure that the identity of all persons who request access to PHI be verified before such access is granted.

Safeguards

Appropriate safeguards will be in place at CCVI to reasonably protect health information from any intentional or unintentional use or disclosure that is in violation of the HIPAA Privacy Rule. These safeguards include physical protection of premises and PHI, technical protection of PHI maintained electronically and administrative protection of PHI. These safeguards will extend to the oral communication of PHI and PHI removed from CCVI.

Business Associates

CCVI will ensure business associates comply with the HIPAA Privacy Rules to the same extent as CCVI, and that they be contractually bound to protect health information to the same degree as set forth in this policy. Business associates permitted to receive PHI include, for example CCVI's billing service, patients' health insurers, and other healthcare providers with whom we consult and coordinate patients' care or to whom we refer patients for specialized care.

Training and Awareness

CCVI will ensure that all employees are trained on the policies and procedures governing PHI and how CCVI complies with the HIPAA Privacy Policy. New employees will receive training within a reasonable time of employment.

Sanctions

CCVI will ensure that sanctions will be in effect for any member of the workforce who intentionally or unintentionally violates any of these policies or any procedures related to the fulfillment of these policies. Such sanctions will be recorded in the individual's personnel file.

Retention of Records

CCVI will adhere to the HIPAA Privacy records retention requirement of 6 years. All records designated by HIPAA in this requirement will be maintained in a manner that allows access within a reasonable period of time. This records retention time requirement may be extended at CCVI's discretion to meet with other governmental regulations or those requirements imposed by our professional liability carrier.

Complaints

CCVI will investigate and resolve all complaints relating to the protection of health in a timely fashion. All complaints will be directed to Practice Manager, who is duly authorized to investigate complaints and implement resolutions.

Prohibited Activities-No Retaliation or Intimidation

No employee or contractor of CCVI may engage in any intimidating or retaliatory acts against persons who file complaints or otherwise exercise their rights under HIPAA regulations. No employee or contractor may condition treatment or payment on the provision of an authorization to disclose protected health information.

Cooperation with Privacy Oversight Authorities

CCVI will ensure that oversight agencies such as the Office for Civil Rights of the Dept. of Health and Human services will receive cooperation in any investigation relative to protection of health information within CCVI. All personnel will cooperate fully with all privacy reviews and investigations.

Investigation and Enforcement

In addition to cooperation with Privacy Oversight Authorities, CCVI will follow procedures to ensure that investigations are supported internally and staff of CCVI will not be retaliated against for cooperation with any authority. It is our policy to attempt to resolve all investigations and avoid penalty phase if at all possible.

For more information about HIPAA or to file a complaint:

Dept of Health and Human Services
Office for Civil Rights, Region IX
90 7th St. 4-100
San Francisco, CA 94103-6705