



Santa Fe Imaging's Notice of Privacy Practices: How medical information about you may be used and disclosed How you can access this information



We Safeguard your Protected Health Information

Santa Fe Imaging is both legally required and professionally committed to protecting the privacy of your health information. Called **Protected Health Information** (or **PHI**) and identified in legislation commonly called the **HIPAA Privacy Rules**, PHI includes information that identifies you, your past or current health condition, what types of care we have provided, your imaging data and radiologist interpretations, and information about payment.

While records of your treatment at Santa Fe Imaging remain the property of the company, you are always entitled to access any of your medical information in our records. On your request through a signed authorization form, we will release the information to you or to other parties you designate. To protect your privacy and reduce fraud, we may require identification – usually a photo ID – to accompany your request. There are times when we will disclose this information to a provider regarding your treatment, or when required by law. This document explains both our obligations and your rights under current laws and practices; should laws or practices change, those changes will also be incorporated into our policies and will apply to all PHI in our possession.

Disclosure and uses for Treatment, Payment, or Healthcare Operations

Circumstances in which we may use or disclose your PHI without requiring a specific authorization from you are described here.

For Treatment We may disclose your PHI to medical and healthcare personnel who are involved in providing your health care: for example, information and images obtained from diagnostic tests we perform at your physician's order will be included in your medical records, and radiologist interpretations of the images will be sent directly to the referring physician, as well as to designated other medical personnel involved in your healthcare. We may also use your medical history to determine what specific study would be most helpful to your provider in diagnosing your condition, and may speak with your physician or clinician to discuss options ; we may also work with your provider to ensure that you don't have any other health problems that could interfere with a recommendation to inject a dye for a particular study.

For Payment We may use and disclose your PHI in the process of requesting permission for an anticipated imaging study, and for billing and collecting payment for the services provided to you. For example, if the payer requires you to receive advance authorization for a study as a condition for payment, we will need to provide information for that process. We must provide information such as identification, diagnosis, and provided services to your insurance company, Medicare, or Medicaid, or other payer when we submit your bill for payment. We therefore will also provide your PHI to our business associates such as billing companies, claims processing companies, and others that process our healthcare billing and claims.

For Healthcare Operations We may use and/or disclose your medical information in the operation of our facility. For example, we may use your PHI in evaluating our quality of service, in credentialing our professional staff, or in audits with our accountants or attorneys. Since we are a medical diagnostic imaging site, incidental disclosure of your PHI may occur during training or demonstrations. In addition, we may use your health information to communicate with you about rescheduling an appointment, or to provide a reminder of an upcoming appointment.

▪ Please contact our Medical Records department if you have any questions relating to your PHI ▪

Disclosure in Accordance with Federal and State Laws

We may also disclose or use your medical information without your prior authorization for legally acceptable or mandated purposes such as those described here.

Legal Requirements We may disclose your medical information to law enforcement or other specialized government functions in response to a court order, subpoena, warrant, summons, or similar process. We may disclose your medical information in certain judicial or administrative procedures, or when required by law, such as workers' compensation or other similar programs. We must also disclose medical information to authorities that monitor compliance with these privacy requirements.

Public Health and Protection We may disclose medical information when a law requires that we report information about suspected abuse, neglect or domestic violence, or relating to suspected criminal activity, or in response to a court order; when we are required to report information about disease, injury, or vital statistics to public health authorities; or when we are reporting to protection or advocacy agencies responsible for monitoring the healthcare system for such purposes as reporting or investigating unusual incidents. In addition, when it can help avoid a serious threat to health or safety, we may disclose your medical information to law enforcement or other persons who can reasonably prevent or reduce a threat of harm, or who can help with the coordination of disaster relief initiatives.

Other Situations If people such as family members, relatives, or close personal friends are involved in your care or helping you pay your medical bills, we may release important health information about you to those people. Under some conditions we may disclose PHI of military personnel and veterans to authorized agencies, or to assist medical/psychiatric research.

Your Rights with Respect to Your Protected Health Information

Limiting Uses & Disclosure You have the right to ask that we limit how we use or disclose your medical information. Although we are not legally bound to agree to the restriction, we will attempt to accommodate requests when we reasonably can, and will put the limits in writing.

Choosing How You Receive PHI You may ask us to send you information at an alternative address or through a specific method. If we can easily provide the information as you request we will do so.

Seeing and Receiving Copies of PHI With a few exceptions (such as information gathered for judicial proceedings), you have a right to inspect and receive copies of your protected health information. You must put your request in writing. If for any reason we deny the request, we will explain why in writing and disclose any right to have the denial reviewed. We may charge you a reasonable fee for copies, and will disclose this in advance so that you can decide for what data you want copies.

Correcting or updating your PHI If you believe that there is a mistake or missing information in our record of your medical information you may request – in writing – that we update our records, telling us why. We will let you know that the change is made. If we were to deny the request for any reason, we would still append your request, our denial, and any further statement from you to your record.

Limited Right To Ask For Prior Disclosures You have the right to ask for a list of the disclosures of your health information we have made in the past six years to persons other than yourself or persons you have personally authorized. The list will not include disclosures made for purposes of treatment, payment or healthcare operations, or for other reasons for which we are not required to keep a record of disclosures. There will be no charge for up to one accounting list in any 12-month period, but there may be a charge for more frequent requests.

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