

BOWDOIN MEDICAL GROUP

April 2003

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

HOW WE MAY USE AND DISCLOSE MEDICAL INFORMATION ABOUT YOU:

- For Treatment purposes we may disclose your health information:
 - To other health care professionals who are involved in taking care of you such as nurses, lab technicians, x-ray technicians or physical therapists.
 - To friends or family members involved in your medical care.
 - To receptionists responsible for setting up appointments for you
 - To specialists if we refer you for treatment
 - To transcriptionists and record clerks responsible for transcribing and filing your progress notes
 - To other health care facilities or organizations we use to provide services such as hospitals, home health agencies, nursing homes or for diagnostic testing.
- For Payment purposes we may use and disclose medical information about you
 - When asking about your health care plans or other sources of payment
 - When we prepare bills to send to your health care plan
 - When we process payment by credit card
 - When we try to collect unpaid amounts due through collection agencies
- We may fax your information to pharmacies, other health care providers or health care facilities
- We may call you to remind you of your appointment
- For Health Care Operations
 - For financial or billing audits
 - For internal quality assurance
 - For our providers to participate in managed care plans
 - For defense of legal matters
 - For development of business plans

We will disclose medical information about you when required to do so by federal or state law. For example:

- To governmental authorities about victims of suspected abuse, neglect or domestic violence
- For health oversight activities – infectious diseases
- In response to subpoenas, court orders or administrative agencies
- For law enforcement purposes

- To Medical Examiners to identify a dead person or to determine cause of death, funeral directors or to organ and tissue donation organizations
- For health related research
- To prevent a serious threat to health or safety
- For specialized government functions
- To worker's compensation programs
- To business associates who perform health care operations for us

We will not make any other disclosures of your health information unless you sign a written authorization form. You do not have to sign this form. If you do sign this form you can change your mind and ask that no further information be disclosed. We cannot take back any disclosures we have already made with your permission.

Patient Rights:

- You may request that we restrict how we disclose your health information for treatment, payment or health care operations. We do not have to agree to this request. If we do agree with this request we will comply with it except in the case of an emergency.
- You may request that we communicate your health information with you in a certain way.
- You may request to review or get photocopies of your health information. This request must be in writing and there may be a fee for the cost of copying.
- You may request that we amend your health information, but at no time will information be deleted or removed. This request must be in writing and must include the reason you want to amend your health information. We may deny your request if it is not in writing or if it does not include a reason to support your request
- You may request a list of how we have disclosed your health information regarding any authorizations that you have signed. Your request must be in writing
- You may request a paper copy of this notice at any time and is available on our web site
- If you feel that the privacy of your health information has not been handled properly, please contact the Bowdoin Medical Group Privacy Officer. You can file a complaint with the U.S. Department of Health and Human Services. We will not retaliate against you for filing a complaint.

If you would like more information or have any requests, you can contact the Privacy Officer at 74 Baribeau Dr. Brunswick, ME 04011 or call 798-4050 ext 396.

If we make any changes in this notice, we will post the new notice on our web site at www.bowdoinmedicalgroup.com, in our office and have copies available to you at your request.

We understand that medical information about you and your health is personal. We are committed to protecting your health information. We ask for your cooperation in this effort by asking that you remain in the patient waiting areas until a nurse calls you for your appointment.