



Koala Pediatrics

121 Center Grove Rd
Randolph, NJ, 07869
Tel: 973-361-4900
Fax: 973-361-1842

Fiona Pakonis, M.D F.A.A.P

HIPAA NOTICE OF PRIVACY PRACTICES

THIS NOTICE OF PRIVACY PRACTICES (THE "NOTICE") DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW THIS NOTICE CAREFULLY.

This Notice applies to Koala Pediatrics. The purpose of this Notice is to describe how Koala Pediatrics may use and disclose your protected health information ("PHI") in accordance with the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), the Health Information Technology for Economic and Clinical Health Act (the "HITECH Act") and the HIPAA Omnibus Final Rule (the "Final Rule"). This Notice also describes the obligations of Koala Pediatrics with respect to your protected health information, describes how your protected health information may be used or disclosed to carry out treatment, payment or healthcare operations, and describes your rights to control and access your protected health information. Koala Pediatrics has agreed to the provisions set forth in this Notice.

We are required to provide this Notice to you pursuant to HIPAA.

The HIPAA Privacy Rule protects only certain medical information known as "protected health information." Generally, protected health information is health information, including demographic information, collected from you or created or received by a health care provider, a health care clearinghouse, a health plan, or your employer on behalf of a group health plan, from which it is possible to individually identify you and that relates to:

- (a) your past, present, or future physical or mental health or condition;
- (b) the provision of health care to you; or
- (c) the past, present, or future payment for the provision of health care to you.

USES AND DISCLOSURE OF HEALTH INFORMATION

TREATMENT, PAYMENT, AND HEALTH CARE OPERATIONS

Koala Pediatrics uses and discloses your protected health information for treatment, payment, and health care operations. Such examples of when our office may use or disclose your health care information for these purposes include:

- Sharing test results with other health care providers for confirmation of a diagnosis;
- Providing your diagnosis or other information about your health to your insurance provider or our billing service to obtain payment for the health care services we provide;
- Reviewing information as part of our quality improvement program.

OTHER USES AND DISCLOSURES

Koala Pediatrics may also use or disclose your protected health information, in compliance with guidelines outlined by law, for the following purposes:

- Providing you with the information related to your health;
- Contacting you regarding appointments, information about treatment alternatives, or other health related services;
- Incidental uses of disclosures (e.g., listing your name on a sign-in sheet, etc.);
- Compliance with all laws (including reports of suspected abuse, neglect, or violence);
- Providing certain specified information to law enforcement or correctional institutions;
- Providing information to a coroner, medical examiner, funeral director, or organ procurement organization.
- When necessary to avert a serious threat to health or safety;
- Military affairs, veterans affairs, national security intelligence, Department of State, or presidential protective service activities;
- Providing information regarding your location, general condition, or death to public or private disaster relief agencies; or



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- Informing a family member, other relative, or close personal friend when:
 - Information is relevant to the individual's involvement with your care;
 - Notification of your location, general condition, or death;
 - To assist in your health care (e.g., pick up prescriptions or other documents, note follow-up care instructions, etc.).

AUTHORIZATION FOR OTHER USES

Koala Pediatrics will make other uses and disclosure of your protected health information only after obtaining your written authorization. If you authorize a use not contained in this notice, you may revoke your authorization.

YOUR RIGHTS REGARDING THE PRIVACY OF YOUR HEALTH INFORMATION

Subject to limitations outlined by law, you have certain rights related to use and disclosure of your protected health information, including the right to:

- Request restrictions on certain uses and disclosures. However, Koala Pediatrics is not obligated to agree to requested restrictions.
- Receive confidential communications of protected health information.
- Inspect and copy your protected health information with some limited exceptions.
- Amend your health information.
- Receive an accounting of disclosures of your health information.
- Obtain a copy of this notice.

KOALA PEDIATRICS DUTIES REGARDING THE PRIVACY OF YOUR HEALTH INFORMATION

Subject to limitations outlined by law, Koala Pediatrics has certain duties related to your protected health information, including:

- Koala Pediatrics is required by law to maintain the privacy of protected health information and to provide individuals with notice of our legal duties and privacy practices with respect to protected health information.
- Koala Pediatrics is required to abide by the terms of the privacy notice that is currently in effect.
- Koala Pediatrics reserves the right to change a privacy practice described in this notice and to make such change effective for all protected health information. Revised notice will be posted in our office and available upon request.

CONCERNS

If you believe your privacy rights have been violated, you may make a complaint by contacting Fiona Pakonis, MD, at Koala Pediatrics, 121 Center Grove Road, Randolph, NJ, 07869, (973) 361-4900, or the Secretary for the Department of Health and Human Services. No individual will be retaliated against for filing a complaint.