

## Uses and Disclosure Requiring your Authorization

Other than the uses and disclosures described herein, we will not use or disclose your protected health information without your written authorization. If you provide us with written authorization, you may revoke it at any time unless disclosure is required for us to obtain payment for services already provided, we have otherwise relied on the authorization, or the law prohibits revocation.

## Special Uses

### Communication with Significant Others

Unless you object, we may exercise professional judgment to determine when disclosures of relevant PHI to a family member, friend or another person is in your best interest. This person would be someone you have identified and indicated as having active interest and/or involvement with your healthcare or payment for your healthcare.

### Marketing and Communications Activities

We may use basic demographic information limited to your name, address, phone number and dates you received services to contact you regarding treatment alternatives, health-related benefits, services or community efforts we feel may be of interest to you. If you do not wish to be contacted as part of our marketing and communications efforts, please notify us in writing at:

Physicians' Clinic of Iowa, PC  
Attn: Marketing Department  
600 7th Street SE  
Cedar Rapids, IA 52401

## Comments and Concerns

If you believe your privacy rights have been violated, you may file a complaint with our office by contacting the Quality Improvement Department at (319) 247-3010. You may also file a complaint with the Secretary of Health and Human Services. There will be no retaliation for the filing of a complaint.

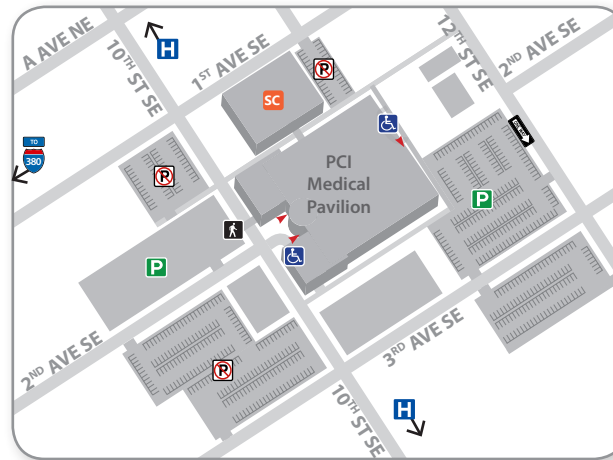
## Effective Date







This notice became effective on April 14, 2003.  
Last revised: 3/4/2013

## Important Contact Information

This notice has been provided to you as a summary of how we will use PHI and your rights with respect to your PHI. If you have questions or desire more information regarding your PHI, please contact reception at the front desk or the Quality Improvement department at (319) 247-3010.

## Directions & Parking >



-  Patient Parking
-  Ground Level Entry
-  Drive-Up/Drop-Off
-  Surgery Center  
Cedar Rapids
-  Hospital
-  Level 2 Skywalk Entry  
from Parking Structure

## Amenities >

### CarePro at the Pavilion

Pharmacy, medical equipment, and gifts

### Caribou Coffee Cafe

Offering a variety of food and beverage choices

### Community Resources Center

Offering a variety of information on local health-related resources

## Directions >

### I-380 Southbound:

- Exit 20B
- Left onto 7<sup>th</sup> ST NE
- Left onto 1<sup>st</sup> AVE SE
- Right onto 10<sup>th</sup> ST SE

### I-380 Northbound:

- Exit 20B
- Right onto 7<sup>th</sup> ST NE
- Left onto 1<sup>st</sup> AVE SE
- Right onto 10<sup>th</sup> ST SE

### Community Room

Dedicated to supporting the Eastern Iowa community through a wide range of health screenings, classes, and events

### Reflection Room

Quiet, soothing space for meditation and prayer

# Notice of Information Practices

THIS NOTICE DESCRIBES HOW INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION.

PLEASE REVIEW IT CAREFULLY.



PHYSICIANS' CLINIC  
of Iowa, P.C.  
Together in health.

202 10th Street SE, Cedar Rapids, IA 52403  
[www.pcofiowa.com](http://www.pcofiowa.com)

(319) 247-3010 | [www.pcofiowa.com](http://www.pcofiowa.com)

Please note, we reserve the right to revise our practices with respect to Protected Information and to amend this notice. A revised or current notice of Physicians' Clinic of Iowa, PC privacy practices is available from reception at the front desk or [www.pcofiowa.com](http://www.pcofiowa.com).

## Protected Health Information (PHI)

While receiving care from our facility, information regarding your medical history, treatment, and payment for your health care may be originated and/or received by us. Information which can be used to identify you and which relates to your medical care or your payment for medical care is protected by state and federal law; this is known as "Protected Health Information" (PHI).

## Your Rights

Federal law grants you certain rights with respect to your PHI. Specifically, you have the right to:

- Receive a paper copy of this notice;
- Request that certain uses and disclosures of your PHI be restricted or revoked, except to the extent that action has already been taken. However, we are not required to agree to such restrictions;
- Access, review and copy your PHI, provided however, the request must be in writing and may be denied in certain limited situations;
- Request that your PHI may be amended;
- Obtain an accounting of certain disclosures by us of your PHI for the past six years;
- Request receipt of communications in a confidential manner, which may be reasonably accommodated by alternative means or at an alternative location.

## Our Responsibilities

Federal law also imposes certain obligations and duties upon us with respect to your PHI.

Specifically we are required to:

- Provide you with notice of our legal duties and our facility's policies regarding the use and disclosure of your PHI;
- Maintain the confidentiality of your PHI in accordance with state and federal law;
- Abide by the terms of this notice.

## How Your Protected Information May be Used and Disclosed

Federal Law allows us to use or disclose your protected health information without your permission for the following purposes:

### Treatment

Your PHI may be used or disclosed to provide, coordinate or manage your care. For example, we may communicate and share your PHI with other healthcare providers and their staff within and outside PCI to ensure continuity of care.

### Payment

Your PHI may be used or disclosed to create bills and collect payment from you, your insurance company or other third party payor. For example, this may include providing information such as dates of service, symptoms, and diagnosis to your insurance company to show we provided medical services to you

### Health Care Operations

Your PHI may be used or disclosed for facility operations, which are necessary to ensure that our facility provides the highest quality of care. For example, this may include quality assessment and improvement activities, medical/legal reviews and auditing functions.

### Uses and Disclosures Required by Law

PHI may be used or disclosed for other purposes to the extent required or mandated by law. For example, to comply with ADA, HIPAA privacy or security rule investigation or reviewing by DHS.

### Public Health Activities

Public Health authorities (including FDA & CDC) are legally permitted to collect and/or receive information for their approved activities.

### Victims of Abuse, Neglect, or Domestic Violence

In a manner consistent with the requirements of applicable federal and state laws, we may use or disclose PHI to a protective services or social services agency if we reasonably believe you have been the victim of abuse, neglect or domestic violence. This reporting is for the health and safety of the victim.

### Health Oversight Activities

Federal and state agencies may access your PHI to oversee the healthcare activities rendered by our facility or our facility's compliance with certain laws and regulations.

## Judicial and Administrative Proceedings

We may release PHI in response to a valid court or administrative order, or in response to certain types of subpoena, discovery requests or other lawful process.

### Law Enforcement

We may release PHI to law enforcement for the following purposes: pursuant to a court order, warrant, subpoena/summons; identifying or locating a suspect, fugitive, material witness or missing person; regarding a crime victim; regarding a decedent, if the individual's death was caused by suspected criminal conduct; necessary to alert the law of a crime, location of a crime, or characteristics of the perpetrator.

### Organ, Eye, or Tissue Donations

PHI may be used or disclosed by us to entities engaged in the procurement, banking or transplantation of organs, eyes or tissues for the purpose of facilitating such donation and transplantation.

### Research Purposes

All research projects are subject to a special approval process that will evaluate the precautions used to protect patient medical information. Any information that identifies you as the patient will be removed.

### Serious Threat to Health Safety

PHI may be used or disclosed when necessary to prevent or lessen a serious threat to the health and/or safety of the public, yourself or another person.

### Specialized Government Functions

PHI may be used or disclosed for the following variety of government functions subject to some limitations: military and veterans activities; national security and intelligence activities; protective service of the President and others; medical suitability determinations for Department of State officials; correctional institutions and law enforcement custodial situations; or provision of public benefits.

### Workers' Compensation

We are allowed to use or disclose PHI as authorized and to the extent necessary to comply with laws relating to workers' compensation or other programs providing benefits for work-related injuries or illness without regard to fault.

### Patient Contact

At times, we may access your PHI to contact you regarding the need to set up an appointment or a reminder about future appointments.