

Children's Heart Institute - Member of Johns Hopkins Regional Physicians

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www.childrensheartinstitute.org

"NOTICES OF PRIVACY ACT"

Effective August 1, 2022

1. The Children's Heart Institute - Johns Hopkins Regional Physicians may use and disclose protected health information for treatment, payment, health care operations and voluntary research operations. Examples of these include, but are not limited to, referrals to home health agencies and other providers for treatment. Payment examples include but are not limited to collection agencies, insurance companies for claims and pre-authorization, including coordination of benefits with other insurers. Health care operations include, but are not limited to, internal quality control and assurance including auditing of records.
2. The Children's Heart Institute - Johns Hopkins Regional Physicians is permitted or required to disclose protected health information without the individual's written consent in certain circumstances. Two examples of such are for public health requirements or court orders.
3. The Children's Heart Institute - Johns Hopkins Regional Physicians will not make any other use or disclosure of a patient's protected health information without the individual's written authorization, which may be revoked at any time in writing.
4. The Children's Heart Institute - Johns Hopkins Regional Physicians will abide by the terms of this notice currently in effect at the time of the disclosure.
5. The Children's Heart Institute - Johns Hopkins Regional Physicians reserves the right to change the terms of its notice and to make new notice provisions effective for all protected health information that it maintains. Any revisions will be posted and copies may be obtained at any time at our office.
6. Any patient, guardian, or personal representative has the right to inspect and obtain copies of their medical records. A fee will be assessed for copies.
7. Any patient, guardian, or personal representative has the right to request amendments to be made to their medical record.
8. Any patient, guardian, or personal representative has the right to request a six-year accounting of all disclosures of their medical records from April 2003 henceforth. The history will be provided within 60 days of the request and a reasonable charge will be assessed for any copies after the first requested in a 12 month period.
9. Any patient, guardian, or personal representative has the right to request restrictions as to how their health information may be used or disclosed to carry out treatment, payment, or health care operations. The practice is not required to agree to the restriction requested in a 12 month period.
10. Any person or patient may file a complaint to the practice and to the Secretary of Health and Human Services if they believe their privacy has been violated. To file a complaint with the practice, please contact the privacy officer at The Children's Heart Institute - Johns Hopkins Regional Physicians at 540-310-0117. It is the policy of this practice that no retaliatory action will be made against any individual that submits or conveys a complaint of suspected or actual non-compliance of the privacy standards.
11. A detailed copy of this Notice of Privacy Act is available upon request.

NAME OF PATIENT: _____

DATE: _____

SIGNATURE OF PATIENT OR GUARDIAN: _____