

Notice of Privacy Practices

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.

Business Options is required by law to maintain the privacy of your health information and to provide you with notice of its legal duties and privacy practices with respect to your health information. If you have questions about any part of this notice or if you want more information about the privacy practices at Business Options please contact:

Business Options
2233 E Main Street
Montrose, CO 81401
Compliance Officer 970-249-3700

Effective Date of This Notice: April 14, 2003

I. How Business Options may Use or Disclose Your Health Information

Business Options collects health information from you and stores it in a chart and on a computer. This is your patient financial account. The account is the property of Business Options, but the information in the medical record belongs to you. Business Options protects the privacy of your health information. The law permits Business Options to use or disclose your health information for the following purposes:

1. Payment. Business Options may use and disclose Protected Health Information for payment from your insurance plan, the responsible party listed on the account and any other person or organization responsible for payment of the account.
2. Operations. Business Options will use and disclose information to our Clearinghouse for the processing of your claim. We will also disclose information to our electronic statement company.
3. Information provided to you. Information will be provided to you and/or any person you name as responsible for payment of your bill.
4. We will disclose your patient account information to immediate family members living in your household. We will obtain your verbal permission before releasing patient account information to any other party.
5. Required by law. As required by law, we may use and disclose your health information.
6. Judicial and administrative proceedings. We may disclose your health information in the course of any administrative or judicial proceeding.
7. Worker's compensation. We may disclose your health information as necessary to comply with worker's compensation laws.
8. Change of Ownership. In the event that Business Options is sold or merged with another organization, your health information/record will become the property of the new owner.

II. When Business Options May Not Use or Disclose Your Health Information

Except as described in this Notice of Privacy Practices, Business Options will not use or disclose your health information without your written authorization. If you do authorize Business Options to use or disclose your health information for another purpose, you may revoke your authorization in writing at any time.

III. Your Health Information Rights

1. You have the right to request restrictions on certain uses and disclosures of your health information. Business Options is not required to agree to the restriction that you requested.
2. You have the right to receive your health information through a reasonable alternative means or at an alternative location. This must be done in writing through your Physician's Office.
3. You have the right to inspect and copy your health information.
4. You have a right to receive an accounting of disclosures of your health information made by Business Options, except that Business Options does not have to account for the disclosures described in parts 2 (payment), 3 (health care operations), 3 (information provided to you), and (certain government functions) of section I of this Notice of Privacy Practices.
6. You have a right to a paper copy of this Notice of Privacy Practices.

If you would like to have a more detailed explanation of these rights or if you would like to exercise one or more of these rights, contact the Compliance Officer at Business Options

IV. Changes to this Notice of Privacy Practices

Business Options reserves the right to amend this Notice of Privacy Practices at any time in the future, and to make the new provisions effective for all information that it maintains, including information that was created or received prior to the date of such amendment. Until such amendment is made, Business Options is required by law to comply with this Notice.

V. Complaints

Complaints about this Notice of Privacy Practices or how Business Options's handles your health information should be directed to:

Compliance Officer at Business Options
2233 E Main Street
Montrose, CO 81401
970-249-3700

If you are not satisfied with the manner in which this office handles a complaint, you may submit a formal complaint to:

Department of Health and Human Services
Office of Civil Rights
Hubert H. Humphrey Bldg.
200 Independence Avenue, S.W.
Room 509F HHH Building
Washington, DC 20201

You may also address your complaint to one of the regional Offices for Civil Rights. A list of these offices can be found online at <http://www.hhs.gov/ocr/regmail.html>.