



PIVOT PHYSICAL THERAPY
NOTICE OF PRIVACY PRACTICES

Effective April 16, 2018

This Notice of Privacy Practices (“Notice”) describes how we may use and disclose your health information to carry out treatment, payment or health care operations and for other specified purposes that are permitted or required by law. The Notice also describes your rights with respect to your health information. Below is a brief summary of our obligations and your rights, followed by a more detailed description. **Please review it carefully.**

YOUR RIGHTS

You have the right to:

- Receive a copy of your paper or electronic medical record
- Correct your paper or electronic medical record
- Request confidential communication
- Ask us to limit the information we share
- Receive a list of those with whom we’ve shared your information
- Receive a copy of this privacy notice
- Choose someone to act for you
- File a complaint if you believe your privacy rights have been violated

YOUR CHOICES

You have some choices in the way that we use and share information as we:

- Tell family and friends about your condition
- Provide disaster relief
- On a rare occasion Pivot may ask you to be included in a marketing campaign, however it would never be done without your specific written consent at the time the campaign was created. We cannot use your name, information or likeness without your permission.

OUR USES AND DISCLOSURES

We may share your information as we:

- Run our organization
- Treat you
- Bill for your services
- Help with public health and safety issues
- Conduct research
- Comply with the law
- Respond to organ and tissue donation requests
- Work with a medical examiner or funeral director
- Address workers’ compensation, law enforcement, and other government requests
- Respond to lawsuits and legal actions

OUR RESPONSIBILITIES

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it,
- We will not use or share your information other than as described here unless you give us permission in writing. If you give us permission, you can change your mind at any time. Let us know in writing if you change your mind.

PRIVACY OFFICER

For questions, complaints or for reasons otherwise noted in this Notice, contact our Director of Corporate Compliance at 410-401-5200 or via email at compliance@pivoths.com.

CHANGES TO THE TERMS OF THIS NOTICE

We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, in our office, and on our website.

For more information, see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html, or contact the Director of Corporate Compliance at the number or email address specified above.