



4625 Churchill Street, Suite 204, Shoreview, MN 55126

PH: (651) 484-6735 FX: (651) 484-5663

E-mail: clinics@motioncare.com www.motioncare.com

MotionCare 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.

MotionCare is committed to serve our customers with professionalism and caring, being sure at all times to protect the privacy and security of all Protected Health Information. During the course of serving your interests it may be necessary to share information with other Health Care Providers or Business Associates. The following are examples of instances where information may be shared:

- During treatment, we may find it necessary to consult with your physician.
- For payment purposes, we may use the services of a billing service.
- During health care operations, we may need a second opinion.

We here at MotionCare are committed to obeying all Federal, State and Local laws and regulations regarding Privacy Practices. If any other uses or disclosures than the ones listed above are needed, information will only be released with the written authorization of the individual in question. This written authorization may be revoked at any time by the individual, as provided for by law.

If you have any questions or comments regarding your Protected Health Information, feel free to contact our Compliance Officer.

I have read and understand the above Notice of Privacy Practices.

Signed:

Date:

Printed:

Accounting of Disclosures of Protected Health Information

| DATE | TO WHOM DISCLOSED | REASON | PHI DISCLOSED |
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Patient Name:

An Authorization:

- Is limited for a "one-time" use or disclosure.
- Expires upon the completion of the "one -time" use or disclosure.
- Is used in relation to uses and disclosures for purposes other than TPO.
- Is detailed, providing specifics about who may receive information and how it is used.