Your Privacy!

Privacy Statement: James G. Knight MD

To My Patients:

Physicians have long understood and protected the confidential nature of the information we collect. Your health and your privacy are now and always have been of paramount importance to me. However, recent federal law (HIPAA) has been enacted to standardize how personal and private data should be managed and disseminated.

In reality, there are very strong competing interests; the most significant of which is the fact that many or most people now pay their heath care bills through a number of different third parties (Medicare, MediCal, HMOs, insurance companies, medical groups etc.) Most of these third party payers require a significant amount of personal information before they will pay for services on your behalf. This data is generally referred to as "claims data".

Claims data information that is commonly required includes such items as your name, address, social security number, date-of-birth, telephone number, and insurance data (additional data is often required in many different situations). In addition to identification data, the third party payers ask for information regarding what services were rendered, the charges, as well what specific diagnoses were treated.

Transmitting the above information to the payers is a practical necessity. Managing collections and claims data has become very complicated, and my practice has engaged a professional billing service, ***Practice Development Strategies, Inc.*** to do the billing for your care. ***Practice Development Strategies, Inc.*** has warranted to me that they are fully compliant with the new privacy regulations and as a matter of practice they have in the past always protected my patients' privacy, even before these regulations were enacted. **I will not be able to accept or keep you as my patient if you refuse to allow *Practice Development Strategies, Inc.* to manage your account and collections on my behalf.**

As your health must always be the most important concern we face together, I am sure you understand that there may be times that I, or my staff, will communicate information about you to other health care providers on your behalf. For instance, if you are referred to me for consultation from another physician, I am required to communicate my findings and recommendations to the referring physician. Or, should you need a diagnostic test such as an X-ray, it is in your best interest that we share some of your medical history with the radiologist in order to get the most information back from the exam. These are just a few examples of how and when we might share otherwise private information on your behalf.

Within the office, we have reviewed the need for handling and securing each patient's medical information in a way that will protect your privacy. This office is secured every day after office hours. The janitorial service that has access to this office is aware of, and accepts its responsibility to preserve and protect your privacy under federal law and has so warranted this to me.

You have a right to review your records with reasonable notice. You may offer amendments to the record. For an additional cost and with adequate notice, you may receive copies of your records.

Rest assured that your information will not be sold or otherwise communicated for commercial purposes. In fact, as a matter of practice, this office will generally refuse to disclose information about you to third parties (except as described above in support of furthering your health or to accommodate billing or collections on your account). Should a need or request arise outside of our routine, we will request that you provide a signed prior authorization for release of medical records.

Again, please realize that your health and privacy have and always will be my principal concerns. If you should have any concerns with regard to the way your information is managed, please do not hesitate to ask me or my office manager who will be our designated "Privacy Officer". While this designation is required by law, in reality my practice is so small that either Cathy or I will be glad to address any of your concerns on these issues.

I have read, understand and agree to the above:

Signed: _____ Date _____

3405 Kenyon Street, Suite 401, San Diego, CA 92110-5007
Phone: (619) 222-1114 Fax: (619) 222-8216