

**LLOYD E. WITHAM, M.D.
JONATHAN S. KING, M.D.**

INDIVIDUAL PRACTITIONERS
1107 IRONWOOD DRIVE
COEUR D'ALENE, IDAHO 83814

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.

We are now required by law to maintain the privacy of patient information and to inform our patients of our policies regarding privacy of their information. As physicians we have always had a professional standard of confidentiality and have always protected our patients' right to privacy. However, in accordance with the new regulations we are disclosing the particular rules we follow, which are outlined below.

Our medical practice is required to abide by the terms of this Notice, which is effective April 14, 2003. We reserve the right to change the terms of this Notice and will provide individuals with a revised Notice of Privacy Practices in that event.

PARTIES TO WHOM WE DISCLOSE INFORMATION

For all our patients, we do not disclose any nonpublic personal information obtained in the course of our practice except as required for 1) insurance billing purposes, 2) as required in the course of scheduling diagnostic procedures or surgery, 3) in accordance with workers' compensation guidelines, 4) as required by the Law, 5) or as requested to be released by the patient.

If you have been referred to us by another physician we may disclose to that physician our doctor's clinical opinion of your condition and/or care.

Your physician will provide the minimum amount of information necessary to your health insurance company in order to obtain payment for the medical care you received.

Your physician obtains services from his/her business associates such as imaging studies, diagnostic workups, physical therapy, surgery, and other similar services. Your doctor will share your personal health information only to the extent necessary for receipt of those services. The recipients of your personal health information are held to the same standard of confidentiality as your physician.

We will not disclose any of your personal health information, not included in this notice, without prior written authorization from you.

We will use our professional judgment to make decisions in your best interest about allowing someone to pick up medicine, medical supplies, x-rays, or medical information for you.

YOUR RIGHTS

You have the right to:

- 1) Request restrictions on disclosure of your personal health information.**
- 2) Receive confidential personal health information communications via alternative means or locations (your bills can be sent to addresses other than your home mailing address, you may request faxed or e-mailed communication). This request must be made in writing to the office manager.**
- 3) You may inspect and obtain a paper copy of your personal health information. This may take up to 30 days to process and there may be a cost-based fee for the copy.**
- 4) You may request an amendment of your personal health information. Your physician is not required to agree to such a request, particularly if the personal health information was generated by someone else, or if the personal health information is accurate and complete. The physician may require the request to be in writing, may require a reason for the request, and may inform others of the request for amendment. If an amendment is requested and the physician denies the request, you may write an objection to the denial and require that all related communication be documented and attached to future disclosure of the personal health information.**
- 5) You may receive a list of disclosures - after the implementation of the Privacy Act - of your PHI for nonroutine, non-TPO uses, with the exception of those made in the interest of national security or a facility's directory (usually a hospital's list of admitted patients). This may take up to 60 days to compile.**
- 6) You may revoke previous authorizations for disclosure, except to the extent the information has already been disclosed as originally permitted**
- 7) You may obtain a copy of the Notice.**
- 8) You may file a formal complaint if your privacy rights are violated. You may file your complaint with the office manager for Orthopaedic Associates. In no way will you be retaliated against for filing a complaint. You may also submit a written complaint to the U.S. Department of Health & Human services. We will provide you with the address.**

If you have any questions in regard to this notice, you may contact our office manager at 1107 Ironwood Drive, Coeur d'Alene, Idaho or at (208) 667-7459.