



HIPAA Information & Patient Notification

Pagoda Medicine, LLC
1235 SE Division Street,
Suite 206, Portland, OR 97202

Under the statues of the **Federal Health Insurance Portability and Accountability Act (HIPAA; passed in 1996)** offices like ours were required to create specific practices to protect **Patient Health Information (PHI)**.

We want our patient's to understand how we protect their privacy when we collect and use health information and the measures we take to safeguard that information. Each of these instances is spelled out in our *Patient Privacy Practice Notice*. We do not disclose any information about a patient or former patient to anyone, except as permitted by law.

The Patient Privacy Practices Notice lists your rights under HIPAA:

- The right to access your PHI
- The right to amend your PHI
- The right to an accounting of disclosures by the health plan
- The right request restrictions on the use and disclosure of your PHI
- The right to receive confidential communications

Please read our *Patient Privacy Practice Notice* posted in the waiting area. Also, please feel free to request all our materials regarding your rights under HIPAA.

By signing, you are acknowledging that you are aware and/or have been given the information regarding HIPAA.

Patient Signature: _____ Date: _____