

Dr. Yoshitaka Asano

Doctor of Chiropractic

Licensed Acupuncturist

Asano Chiropractic & Acupuncture

4950 Barranca Pkwy, Suite 301 Irvine, CA 92604

(949) 310-3312

Dear Patient:

In Accordance with the federal government requirements of the 1996 Health Insurance Portability and Accountability Act (HIPAA), effective 14th April 2003, I am providing you with a copy of my Privacy Policies, which outlines:

- How I and my staff secure your Protected Health Information (PHI), and
- Your rights to permit or restrict the sharing of your personal health information or information concerning any individual for whom you have legal rights as parent, guardian, caretaker, or hold a properly executed durable power of attorney for health care.

We are updating your file to comply with this federal HIPAA act. As part of this process, we need to have your signature on file, indicating that you know we are doing our best to fully protect the privacy of your health information.

In the event of widely and loosely related individuals, we may require proof of your legal right to information for your minor children, and/or for any adult to whom you stand as guardian or caretaker, or for whom you have a durable legal power of attorney for health care. This will help us protect your personal privacy, as well as enabling you have access to health information that fully supports each individual under your care the fullest continuous movement towards your goals of greater health.

THIS NOTICE DESCRIBES HOW CHIROPRACTIC AND ASSOCIATED HEALING PROCESS INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED, AND HOW YOU CAN GET ACCESS TO THAT INFORMATION

Please sign and date the last page. You can receive a copy to keep.

I, Dr. Yoshitaka Asano, D.C., L.Ac., am required by the federal government's 1996 Health and Human Services Health Insurance Portability and Accountability Act (HIPAA) to protect Personal Health Information (PHI) made available to me during your consultations with and treatment from me. The privacy standards protecting your PHI privacy are set forth in this privacy notice effective 14th April 2003. Once you have received this notice, I reserve the right:

To amend this privacy notice at any time,

To determine how information about any revised or amended privacy notice will be made available to you, and

To determine the effective starting date of a revised privacy notice.

The information is organized into 5 sections:

- 1 Your Right to Access Your Personal File and Billing Records**
- 2 Who Has Access to Your Records at the Office**
- 3 Sharing Your Private Health Information With Others**
- 4 Reasonable Precautions Being Taken to Protect Your Private Health Information by Dr. Yoshitaka Asano and his Personal Staff**
- 5 Summary and Signatures**

1. Your Right to Access Your Personal File and Billing Records

As a patient, you always have the right to inspect and copy your own health records, and those of any minor children or other individuals for whose health care you are legally and financially responsible, during normal business hours per the Freedom of Information Act.

After inspecting your records, or those of individuals for whom you are legally and/or financially responsible, you have the right to amend any inaccuracies in our records. This must be done in writing.

2. Who Has Access to Your Records at the Office

I, Dr. Asano, my reception staff and office manager have access to your personal treatment and billing files. A billing personnel may have access to your records. Files are safely kept at night and on weekends. The computer containing mostly name, address and financial records is password protected and shut down at night and on weekends.

Filed backup ledger cards are filed in the individual record folders. Inactive files are removed from the file cabinets and stored elsewhere and are not easily accessible. Please keep in mind that we are only required to keep health information available for seven (7) years. If you have not had a treatment from me for at least three (3) years, your first appointment with me will be that of a "new" patient because of the longer time it will take to evaluate your current state of health.

3. Sharing Your Private Health Information With Others

In addition to myself and my staff, other entities with regular access to any part of your PHI is my bank which processes your check payments.

No other practitioner at Asano Chiropractic & Acupuncture is authorized to have access to your file(s), or the file of any individual under your legal control who is also a patient of mine. However, if you consult or have an appointment with one of the other Clinic practitioners, if you provide a completed and signed authorization form to one of my staff, that practitioner may review my file on you as an aid to "bringing them up to speed".

If you receive a Super-bill from my office, and submit it to your insurance company, your agreement with them gives them the authority to request copies of your file.

There are three (3) other times when your PHI may be accessed by legal agencies outside our offices without your authorization. They are:

1. Law enforcement officials or a court-appointed attorney presenting a subpoena
2. In response to a subpoena issued in a civil matter, and
3. For research purposes, provided certain steps are taken. Dr. Asano is not currently involved in any research protocols.

In our experience, past request from legal entities have provided a copy of your signature authorizing us to release your information to them. Usually legal agencies send a messenger with portable copy machine to copy a file here in the office. When we are requested to make a copy of a file, after receiving the authorizing document with your signature, we make and send a copy of your records to them. In such a case, the legal entity pays us a fee for copying services. While we have not yet set a patient copy price, if we do, the notice will be posted near the desk.

Privacy Statement Updates

If there are any changes or updates made to this Privacy Statement, a copy of the changes, with the effective date for those changes, will be posted near the desk. You may request a copy of the changes for your records.

4. Reasonable Precautions Being Taken to Protect Your Private Health Information by Dr. Yoshitaka Asano and his Personal Staff.

Print Patient Name (a separate privacy statement is required for each minor child):

Print Name (If Personal Representative of Minor or Adult Legally Under Your Care):

Your Signature:

Date: _____

Describe Legal Relationship for Client Other Than Yourself:

(Parent: [mother, father, step-mother or father, etc.], guardian, caretaker with durable power of attorney for health care, etc. Please note that a copy of the legal documents verifying your status may be requested for the patient's file.)

Printed Name: Yoshitaka Asano, D.C., L.Ac.

Signature *Yoshitaka Asano, D.C., L.Ac*

Date: _____

Appointment Reminder Phone Calls

Client appointment reminder phone calls and/or messages are generally made to your home or cell phone. Calls are made to your business phone either when that number is preferred by you, or if something important comes up. Since my staffing office hours are generally weekdays only, being able to reliably contact you during the day is important.

Patient Name Privacy Protection for Regular Appointments

Although I have a small, family-oriented practice, we do our best to keep your name as private as possible.

Sound Issues

Asano Chiropractic & Acupuncture is a small, older facility. Your personal consideration of others, particularly in the area of sound, is requested. If you choose to answer a portable phone once you have arrived at the office, we prefer that you do so outside. The Clinic is meant to be a place of serenity.

Although our treatment rooms are not soundproof, normal conversations are not audible in public areas such as hallways. Chimes, music, snapping or other sounds occasionally may be heard as part of treatment modalities.

Birthday Card, Thank you Card, Christmas Card, or Seminar letter

Our clinic will send you cards and letters for only patients' better healthcare. If you like to avoid receiving cards or letters, you can request us not to send them.

Patient File Protection and Storages

We store our client files in file cabinets to protect your PHI confidentiality from access by other HAC practitioners, evening and weekend seminar attendees.

5. 14th. April 2003 Privacy Summary

I understand that by voluntarily signing and dating this Privacy Statement, I:

1. Am verifying that I have read and consented to this statement for my personal health care records,
2. Am authorizing Dr. Asano and his staff to have access to Personal Health Information provided by me, or received about me from other authorized sources (such as other doctors or labs),
3. Am understanding that they will keep my information private and safe, and
4. Neither Dr. Asano nor his staff will release and private health information without my prior written authorization, except as noted in Section 3.

If you have a privacy concern that is not covered by this notice,

You are encouraged to discuss it with either Dr. Asano or his privacy officer, or any other member of Dr. Asano's staff (not including other independent practitioners providing services at Asano Chiropractic & Acupuncture. We will respond as promptly as possible to your concern, and advise you of the actions we have taken to address this concern and further protect the privacy of your Personal Health Information.