

 **Morningstar Healing Arts**   
**Greetings from all of us at Morningstar Healing Arts**

We are honored that you have chosen Morningstar Healing Arts for your health care needs. Howard and Sue Morningstar, along with our support staff, will try at all times to provide you with the best possible health care. To assist us, please fill out all four pages of your health history form as fully as possible before your first appointment. Also, don't forget to bring your current insurance card with you.

We are committed to helping you improve all aspects of your health, from providing health awareness and disease prevention education to relieving the physical and emotional symptoms of illness. We will also assist with referrals to specialists and other healing professionals. Please let us know if you have any special concerns, or if we are not meeting your expectations in any way.

**How to contact us:**

We are available by phone Mondays through Fridays from 9 am to 12 noon and from 2 to 4:30pm at 482-2032 for appointments and to answer your questions.

**We require 24 hours advance notice if you need to cancel or reschedule your appointment,** so we can arrange to take care of another person instead.

It's best to call us early in the day if you have an urgent medical problem and would like to be seen on the day you call. Our staff prioritizes and responds to dozens of calls a day. Please help us give you the best possible service by calling your pharmacy two working days in advance to arrange for routine prescription refills.

After hours, we participate in a call group with other Ashland family practitioners, who can be reached to discuss urgent medical issues anytime by calling our office phone number.

**Billing and payment policy:**

We accept and will bill most medical insurance plans on your behalf. However, because every insurance contract is different, we often cannot determine which services will be covered by your plan. If payment is denied for any reason, your medical bill always remains your personal responsibility.

**Your office visit co-pay and any deductibles are due at the time of your visit. We accept cash and personal checks, but not credit cards.** Depending on your coverage, you may also be billed separately for lab tests and other procedures such as PAPs, biopsies and vaccinations.

**If you are paying for your health care yourself, we expect full payment at the time of your visit.** If this is not feasible for you, please inform our staff and we will do whatever is possible to work out a mutually agreeable payment plan.

Please arrive fragrance-free for your visits with us, as many of our patients have fragrance sensitivities.

With blessings of good health,

Howard Morningstar, MD   Sue Mauer Morningstar, WHCNP

 **Morningstar Healing Arts**   
**Notice of Privacy Practices**

**We at Morningstar Healing Arts have always had a strong ethical commitment to protecting the privacy and accuracy of our patient's medical records.** On April 14<sup>th</sup>, 2003 a federal law, the "Health Insurance Portability & Accountability Act" (HIPAA) took effect. This law governs how health care providers may use and disclose your medical information, and how you can access your information. HIPAA requires that we develop and notify you of our policies to protect the privacy of your medical information.

This notice of privacy practices applies to Morningstar Healing Arts medical staff, employees, our contracted service providers, volunteers and students. It reflects our belief that, except in dire circumstances, we are obligated to protect the confidentiality of your medical records to the fullest extent possible.

**The following categories describe examples of different ways we may use or disclose your medical information:**

- 1) We will contact you as needed to provide you with medical care and related services.
- 2) We may share medical information about you to others actively involved in your health care, such as specialists, healing professionals, medical service providers and others that you designate.
- 3) We may disclose medical information about you for billing or treatment authorization purposes.
- 4) We may disclose medical information about you to health plans for operational purposes such as quality monitoring.
- 5) We may disclose medical information about you to governmental agencies if required for public health, disease prevention and disaster management activities.
- 6) We may report possible cases of abuse or neglect, domestic violence and serious adverse reactions to medications or medical products.
- 7) We will report births and deaths and will release medical information as needed to coroners, funeral directors and medical examiners.
- 8) If you are an organ donor, we will release medical information needed for organ donation.
- 9) If you are a member of the military, we will release medical information about you as required by military authorities.
- 10) We may disclose medical information about you in response to a court order, subpoena, discovery request, or other similar civil or criminal legal process.
- 11) We may disclose medical information about you if needed to investigate criminal conduct at our office or a death, injury or illness that we believe may be the result of criminal conduct.
- 12) We may release medical information about you if required to do so by authorized federal officials for "intelligence, counterintelligence, secret service and for other national security activities as authorized by law".
- 13) We may release medical information about you in emergency circumstances to protect your health and safety or the health and safety of others.

### **Your rights regarding your medical information:**

1) You may request to review and to receive copies of your medical records from us. There is a 50 cent a page charge to cover our costs, plus any added postage. We will not release copies of medical records that were not created by us except in emergency situations.

2) If you feel that your medical information is incorrect or incomplete, you may ask us in writing to amend the information. If we agree, we will add the amended information to your medical record. If we disagree, we will provide a written explanation that will become part of your medical record. You may respond, your response will be added to your record.

3) We will disclose your medical information for purposes not covered by this notice only with your specific additional written permission. You may revoke that additional permission in writing at any time.

4) You may request in writing that we place additional restrictions on how we disclose medical information about you. We are not required to agree to your request. If we do agree, we will comply except in emergency situations.

5) In accordance with Oregon and federal laws, we will not release “specially protected information”, regarding HIV testing, mental health counseling or drug and alcohol dependence treatment records without your specific additional consent except in certain emergency situations

6) You have the right to request in writing and to receive a list of disclosures we made of your medical information, except for disclosures needed for treatment, payment and health care operations, disclosures you requested, disclosures to correctional institutions or disclosures for national security or law enforcement purposes.

7) We will provide you with a copy of this notice. If we change our privacy policies (which we are permitted to do at any time) we will offer you a copy of our current policies the next time you register for an office visit.

8) If you believe we have compromised your medical information’s privacy, we invite you to discuss your concerns with us.

9) You may request that we contact you about medical matters in specific ways or at specific locations, according to the instructions you provide us in your “Patient Privacy Questionnaire & Instructions”.

Sue Morningstar is Morningstar Healing Arts’ designated privacy officer, and can be reached by calling (541) 482-2032 during office hours or by mail at 534 Washington St. Ashland, OR, 97520. If we cannot resolve your concerns, you may file a written complaint with the Secretary of the Department of Health and Human Services in Washington, DC. Your privacy is of great concern to us. Please let our staff know if you have any questions or comments about HIPAA and Morningstar Healing Arts’ privacy practices. As ever, we remain committed to providing you with the best possible health care.

With blessings of good health,

Howard Morningstar, MD   Sue Morningstar, WHCNP