



"A women's center serving the families of our community"

# HIPAA PRIVACY PRACTICES

## SUMMARY OF PATIENT RIGHTS AND RESPONSIBILITIES

- Your medical information is protected. It will be kept confidential and is only used or disclosed for treatment that will ensure your care and wellness.
- We may leave messages for you regarding your medical care or next appointment with us via voice mail or text messaging, unless indicated otherwise.
- We will supply appropriate and necessary information to insurance companies and/or financial companies if needed.
- You have the right to access and obtain copies of your health information records, including amending authorization to whom medical information may be released.
- If you believe your privacy rights have been violated, you may file a complaint. Filing a complaint will not infringe on your patient care or privacy rights. No action will be taken against you for filing a complaint.
- This is a summary of your privacy practices. The full text is available to you today or online at: [fallschurchhealthcare.com](http://fallschurchhealthcare.com)

I have read this summary of my privacy rights. I understand my rights and responsibilities as well as the privacy practices at the Falls Church Healthcare Center. I understand the full text of FCHC's patients rights are available to me at: [fallschurchhealthcare.com](http://fallschurchhealthcare.com) or by request at the front desk.

- I would like a copy of the full text of Falls Church Healthcare Center's privacy practices.
- I do not want a copy of the full text of Falls Church Healthcare Center's privacy practices.

X \_\_\_\_\_  
Patient Name (Print)

\_\_\_\_\_  
Date of Birth

X \_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Today's Date



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### Patient Contact Sheet

Patient Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Mobile Phone Number: \_\_\_\_\_ May we Leave A Message?  YES  NO  
 Home Phone Number \_\_\_\_\_  
 Valid Email Address: \_\_\_\_\_  
 Home Address: \_\_\_\_\_  
 \_\_\_\_\_

The Falls Church Healthcare Center has the capability to text and email patients regarding past, present and future appointments. The nature of the text messages and emails that are sent may be related to:

- Appointment Reminders
- Office Hour Updates
- Scheduling Reminders
- Billing Matters
- Scheduling Updates
- Request for Feedback

**OPT OUT:** I do not want FCHC to send me automated reminders about my appointment. I understand that FCHC staff members may still contact me about my appointment(s) without using the automated appointment reminder system. \_\_\_\_\_  
 Patient Initials

#### Patient Demographic Information

The information in this box is submitted to the Division of Vital records, Virginia Department of Health. No identifying information will be submitted.

**County of Residence:**  Fairfax  Arlington  Loudoun  Prince William  Other \_\_\_\_\_  
**Highest Grade/Degree Completed:** \_\_\_\_\_  
**Marital Status:**  Married  Single  
**Race:**  Black/African American  White/Caucasian  Native American or Alaska Native  
 Native Hawaiian or other Pacific Islander  Asian (Please list country of origin) \_\_\_\_\_  
 Mixed race (please list all) \_\_\_\_\_  
**Ethnic Origin:** Hispanic Country of Origin \_\_\_\_\_  
 Other Country of Origin \_\_\_\_\_

I agree that the above is correct and accurate. I am aware that the information on this form will remain valid unless I submit an updated form.

X \_\_\_\_\_  
Signature

\_\_\_\_\_  
Today's Date





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## Insurance Carriers Currently Accepted

Updated October 2018

<b>Aetna PPO, HMO</b>	<b>Carefirst Blue Choice, HMO PPO</b>
<b>Anthem HMO, PPO</b>	<b>Cigna</b>
<b>Assurant</b>	<b>Coventry</b>
<b>PHCS</b>	<b>Aetna Signature Administrator</b>
<b>Coresource</b>	<b>Anthem Healthkeeper Plus</b>
<b>Carefirst Administrator</b>	<b>Great West</b>
<b>Guardian</b>	<b>Meritain Health</b>
<b>One Net Alliance</b>	<b>First Health Network</b>

Most insurance companies cover Gynecologic services, contraception, and abortion care but your individual policy obtained by your employer may have restrictions. Let us check for you or you can call your customer service representative listed on your insurance card. Please provide your insurance information when you schedule your appointment so our FCHC staff can verify your benefits for you.

- Policies from Blue Cross Blue Shield with a prefix, "R" (Federal Government Restricted) and Golden Rule do not cover abortion care.
- Medicare, Medicaid, and Tricare do not cover abortion care.
- We do not accept First Health (which only covers injury or illness not related to routine GYN services).