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NOTICE OF PRIVACY PRACTICES

Date of Last Revision: 04/24/13
Effective Date: Immediately

This information is made available to all patients

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU
MAY BE USED AND DISCLOSED AND HOW YOU MAY HAVE ACCESS TO
THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

THIS NOTICE APPLIES TO ALL OF THE RECORDS OF YOUR CARE GENERATED
BY THE PRACTICE, WHETHER MADE BY THE PRACTICE OR AN ASSOCIATED
FACILITY.

This notice describes our practices policies, which extend to:

- Any health care professional authorized to enter information into your chart (including physicians, PAs, RNs, MAs etc);
- All areas of the practice (front desk, administration, billing and collections, etc.);
- All employees, staff and other personnel that work for or with our practice;
- Our business associates (including a billing service, or facilities to which we refer patients), on-call physicians, and so on.

The Practice provides this Notice to comply with the Privacy Regulations issued by the Department of Health and Human Services in accordance with the Health Insurance Portability and Accountability Act of 1996 (HIPPA).

OUR THOUGHTS ABOUT YOUR PROTECTED HEALTH INFORMATION:

We understand that your medical information is personal to you, and we are committed to protecting the information about you. Our entire staff, as a condition of employment must sign a privacy statement form to ensure The Practice maintains a strict protection of the patient's confidential information in forms such as electronic oral, written or photographic. As our patient, we create paper and electronic medical records about your health, our care for you, and the services and/or items we provide to you as our patient.