**Privacy Policy for Ghanshyam Gupta, MD,PC. DBA Advanced Gastroenterology**

**Effective Date:** March 1, 2025

At Advanced Gastroenterology, we are committed to maintaining the privacy and confidentiality of your personal health information. This Privacy Policy explains how we collect, use, disclose, and safeguard your information in accordance with applicable privacy laws, including the Health Insurance Portability and Accountability Act (HIPAA), the Maryland Confidentiality of Medical Records Act (COMAR 10.93), and other relevant state and federal regulations.

**1. Information We Collect**

We collect the following types of personal information from our patients:

* **Personal Identification Information:** Name, address, date of birth, phone number, and email address.
* **Medical Information:** Health history, diagnosis, treatment plans, medications, laboratory results, imaging, and any other health-related data necessary for the provision of care.
* **Billing and Insurance Information:** Insurance details, billing information, and payment history.

**2. How We Use Your Information**

We use your personal health information for the following purposes:

* To provide you with medical care and treatment.
* To communicate with you about appointments, test results, and other health-related matters.
* To process insurance claims and handle billing.
* To comply with legal, regulatory, and administrative requirements.
* To improve the quality of care we provide.

**3. Call Recording**

Please be advised that our phone system records calls made to and from our practice. The purpose of call recording is for training, quality assurance, and operational purposes to ensure that we are providing the best care and service to our patients.

By communicating with us via phone, you consent to the recording of these calls.

**4. How We Protect Your Information**We are committed to safeguarding your health information. We employ a variety of security measures to protect your data, including:

* Electronic and physical safeguards to protect your personal health information from unauthorized access.
* Secure transmission methods for electronic communication.
* Restricted access to your health information to only those who need it to perform their job duties.
* Secure systems backed by firewall technology to prevent unauthorized access and ensure data protection.

**5. Disclosure of Your Information**

We may share your information in the following situations:

* **To healthcare providers** involved in your care, such as specialists, laboratories, or hospitals.
* **To third-party service providers** who assist us in operating our practice, such as billing services or IT support (they are also required to safeguard your data).
* **As required by law**, including responding to subpoenas, court orders, or regulatory inquiries.
* **With your consent**, for purposes such as sharing your information with family members or others you designate.
* Mobile information will not be shared with third parties for marketing purposes. To opt out, text STOP.

**6. Special Considerations**

* **HIV/AIDS and Mental Health Records**: In accordance with Maryland law, we will not disclose your HIV/AIDS or mental health records without your specific written consent, unless required by law.

**7. Your Rights Regarding Your Information**

You have the following rights regarding your personal health information:

* **Access:** You have the right to request copies of your health records. Under Maryland law, you can request your medical records, and we will provide access to them within 21 days of the request. Please note that our office does charge for medical records. The first 10 pages are provided at no cost, but any additional pages will incur a fee of $0.76 per page.
* **Correction:** You can request corrections to any inaccuracies in your health records.
* **Restrictions**: You can request restrictions on how we use or share your information (although we are not required to agree to all requests).
* **Revocation of Consent**: You may revoke consent for us to share your information with certain individuals or organizations at any time.

**8. Retention of Your Information**

We will retain your medical records for at least five years after the last treatment date, as required by Maryland law.

**9. Notification of Data Breaches**

In the event of a breach of your personal health information, we will notify you as required by applicable Maryland state law and federal regulations.

**10. Changes to This Privacy Policy**

We reserve the right to update this Privacy Policy as needed to reflect changes in laws or our practices. Any updates will be posted on our website and will become effective upon posting.

**11. Multiple Office Locations**
Our practice operates more than one office location. In addition to our primary office at **10110 Molecular Drive, Suite 111, Rockville, MD 20850**, we also have a second location at:
**2415 Musgrove Road, Suite 109, Silver Spring, MD 20904**
Patient information may be shared or accessed by authorized personnel across these locations as needed to provide medical care or administrative support. All locations adhere to the same privacy and security standards to protect your personal health information.

**12. Contact Us**

If you have any questions or concerns about this Privacy Policy or wish to exercise your rights under it, please contact us:

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