

Dear Patients:

I wish to inform you that I will be retiring from my Morgantown area medical practice on January 31, 2012. This will include my practice in Preston County, West Virginia.

Transfer of Care -

Your first step in finding another doctor to take care of your orthopedic needs may be to contact your family doctor for another referral. In the case where you do not have a family doctor or do not have a referral from a close friend, our office will be happy to try and assist you in finding another orthopedic doctor. Unlike many areas in our state, the Morgantown area is very fortunate to have many well trained orthopedic surgeons. However, not all of them participate with every insurance company and some are very specialized in what they accept.

Several physician colleagues have accepted my patients previously in transfers for care of general orthopedic conditions and may be willing to do so again, provided insurance companies are compatible and their office rules are followed.

Some of these physicians are:

Dr. William Post- Sports Medicine, General Orthopaedics-(304) 594-0456

Dr. Dean Steinman – Occupational Medicine, General Orthopedic medicine, back neck problems (304) 598-0282

Dr. Kent Thrush – Total Joints, General Orthopedics (304) 366-2151

Dr. Chris Vasilakis & Associates- Total Joints, General Orthopedics – (304) 599-0720

Dr. Alvaro Gutierrez – Neurology, carpal tunnel, non-workers' comp back and neck pain and Fibromyalgia. - (304) 594-3258

Dr. Shelly Kafka – Arthritis and Fibromyalgia – (304) 624-4317

For those of you with an active Workers' Comp claim under treatment, I would recommend that you immediately contact your Claims Manager to discuss a referral to another physician. Not all doctors take Workers' Comp insurance; therefore, your Claims Manager may need to research this for you.

In general, anyone with an active case under treatment should call me (304) 599-5599 Mon-Thur 8am-4:30pm, or make an appointment to discuss options of care before January 15, 2012.

Another valuable referral resource is the Monongalia County Medical Society. The secretary is Sharon (304) -777-2228 or (304) 282-2889. You may also consider also calling the WV State Medical Society (304) 925-0342 for advice on a referral

Medical Records

I will continue to maintain your Morgantown and Preston County office medical records as required by WV law for the next 5 years. Your Miller Orthopedic charts will remain in the Morgantown office until January 27, 2012, at which time they will be transferred to secure storage. All requests for copies of medical records must be by written request with a signed authorization release form -attached, or may be downloaded from www.smillerortho.com.

Requests for records should be addresses to our office 1195 Pineview Drive, Suite 1, Morgantown, WV 26505 until January 15, 2012. After January 15, 2012, all records requests with signed authorizations should be sent to:

**Miller Orthopaedics
P.O. Box 4760
Morgantown, WV 26504-4760**

A small fee will be charged after February 1, 2012 for retrieval from records from secure storage.

Please call (304) 599-5599 if you have any questions or see our website, www.smillerortho.com.

Attached you will find a copy of the medical authorization form required by HIPPA (Health Insurance Portability and Accountability Act) to obtain copies of your records. This form is available in our office, or may be downloaded from our website www.smillerortho.com.

Billing Questions

Any and all question regarding billing for financial issues should be addressed to RVHA Billing 1-(866) 695-1382 in Wheeling, WV.

I close by wishing all of you the very best and thanking you for the opportunity to serve you as your doctor. If you have any questions or need additional information, do not hesitate to call me at (304) 599-5599.

Very Best Wishes and Happy Holidays,



Steven C. Miller, MD

December 13, 2011

OFFICE POLICY RE: XRAYS- MEDICAL RECORDS/ OFFICE CLOSURE

Patients requesting copies of x-rays for their files need to be informed :

1. Our x-rays are in standard film format, not digital format. We have no means to make copies of the film. We have checked around and no one in our area has the capability or means to make copies anymore.
2. Therefore, because the x-ray is a part of the legal record and is the only "document" available, we must retain that document for legal purposes.
3. However, I understand there may be circumstances where the past x-ray may be needed by a physician for comparison purposes to a new x-ray. Therefore, if a physician's office requests the past x-ray we will arrange for it to be sent to that physician's office.
4. In most all cases, it is my opinion that new x-rays would most likely be required to assess any new situation or to update a physician's insight into a problem. Therefore in most cases, the the retrieval and viewing of old x-rays would not be necessary.
If old x-ray are required and retrieved from secure storage, a fee will be charged to the requesting party to cover postage and handling by the storage facility.
5. All of our current records and x-rays will be in secure, environmentally safe storage for at least the next 5 years, beginning January 31, 2012 at EvriChart, 200 Mountain Ave., White Sulphur Springs, WV 24986. (888)801-2020.

Steven C. Miller MD

STEVEN C. MILLER, MD, PLLC
AUTHORIZATION FOR RELEASE OF MEDICAL RECORDS

PATIENT NAME: _____

DATE OF BIRTH: _____ SS# _____

ADDRESS: _____

PHONE #: _____

I hereby authorize Steven C. Miller, MD, PLLC, 1195 Pineview Dr, Morgantown, WV 26505 to release information from my medical record as indicated below to:

NAME: _____

ADDRESS: _____

PHONE: _____ FAX: _____

INFORMATION TO BE RELEASED:

____ Office Notes

____ Other _____

Date(s) of treatment: _____

Reason for Request/Disclosure: _____

I understand the following:

- My health record(s) will not be released or obtained by Steven C. Miller, MD, PLLC unless permission is granted by my signature on this authorization.
- Only the records checked above will be released for the above-stated reason(s).
- Although prohibited, it is possible that my medical records may be re-disclosed by the facility receiving my records, therefore, Steven C. Miller, MD, PLLC has no responsibility or liability as a result of the re-disclosure, and such information would no longer be protected by the HIPPA Privacy Rule.
- I am entitled to a copy of the completed authorization form.
- This authorization is valid for one year from the date of signature, unless a specific timeframe less than one year is documented:
 - Specific timeframe for validity: _____
- I have the right to revoke this authorization at any time by sending a written request to:
 - Steven C. Miller, MD, PLLC, 1195 Pineview Dr, Morgantown, WV 26505
- By revoking this authorization,
 - My decision to revoke the authorization does not apply to any release of medical records that may have taken place prior to the date of the revocation request.
 - My decision to revoke the authorization may result in my insurance company not being able to pay for my medical care and I may be liable for payment of the claim.
- Federal and state laws indicate that a reasonable, cost-based fee may be charged for copies of medical records. Copies of my records that are provided for my continued care will be mailed to my physician at no charge.

Signature of Patient or Legal Guardian/Relationship

Date

Witness

Date