

Privacy Policy Notice

Center for Integrative Health Inc.

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully. We are committed to providing you with high quality care and to forming a relationship with you that is built on trust. We understand that information about you is private and we are committed to protecting this information. We protect your privacy and procedures that allow access to your personal information only for legitimate reasons. This notice describes how your health information may be used and disclosed by us, your rights with regard to your health information, and our duties to protect such information. It applies to all records or your care that we maintain. Whether this information is stored in writing, on a computer, or other means, we will keep this information in a safe and secure way that protects your privacy and confidentiality.

I. USES AND DISCLOSURES OF YOUR HEALTH INFORMATION:

This section describes how we use and disclose your health information. This section is divided into two components: (1) health information excluding human immune-deficiency virus test (HIV) results; and (2) HIV test results. The first discusses how your health information (excluding HIV test results) will be used and disclosed. Below, we have listed the types of uses and disclosures that we may make. Any use or disclosure that is not listed below will only be made with your written authorization. The second discusses how we may disclose your HIV test results (if we have such information). HIV test results are afforded extra protection. There are only a limited number of instances in which the results may be disclosed without your permission. All other disclosures not listed in this section on HIV test results will require your permission.

A. Uses and Disclosures of Your Information (Excluding HIV Test Results)

a. Without Your Authorization

Your health information may be used and disclosed by us for the following purpose without your legal permission. However, prior to making such use or disclosure, we may have to meet certain requirements.

Treatment, Payment, and Business Purposes. We use and disclose your health information to enable us to provide treatment to you, obtain payment for your care, and manage and administer our practice. For instance, we may use and disclose your health information to your insurer, HMO, or other third party payer to obtain payment for the services that we provide you. As another example, in consulting with a specialist regarding your health care treatment, we use and disclose your information. As a further illustration we may use and disclose your health information to review the adequacy and quality of the care that you receive. As another example of managing our practice, we may use and disclose your information to create de-identified information to enable us to study our treatment patterns and the care that we provide.

Individual Involved in Your Care or Payment or Notification. We may disclose your information to your family members or friends who are involved in your care or who assists you in paying for your care. If we need to notify family and/or friends of your medical condition and/or location, we may also disclose your information. This notification may be via a disaster relief effort, such as the American Red Cross.

Appointment Reminders. Your health information may also be used and disclosed by us when we contact you to remind you of an upcoming appointment. We may disclose such information to another entity to assist us in contacting you. Such an entity would be required to protect your information. If you don't want to be contacted for such an activity, please call our Office Administrator at our local office.

To You. We will provide you with your health information upon your request for copying and inspection and accounting purposes as discussed further in this notice under "Individual Rights."

Secretary. We may provide your health information to the Secretary of the Department of Health and Human Services in order for the Secretary to investigate issues and determine our compliance with federal privacy requirements.

Required by Law. We will disclose your information when we are required to do so by federal, state, or local law.

Health Oversight Activities, we may disclose your information for health oversight activities. For example, a health oversight activity may include the disclosure of information in the course of an investigation of a provider's conduct to a state licensing board official.

Cadaveric Organ, Eye or Tissue Donation. We may disclose your information if you are an organ, eye or tissue donor so that we can assist entities with donations and transplants.

To Avert a Serious Threat to Health or Safety. We may use and disclose your information if it is necessary to avert a serious threat to the health or safety of yourself or others or to assist law enforcement authorities in identifying or apprehending an individual.

Coroner, Medical Examiners, and Funeral Directors. We may disclose your information to coroners, medical examiners and funeral directors to assist them in identifying a deceased person, determining the cause of death, or other duties required for them by law.

Research. We may disclose your information for medical or health-related research. However, this type of disclosure, similar to some others in this category, will require that the recipient (i.e., researcher) ensures that your information will be protected.

Abuse, Neglect, or Domestic Violence. We may report your health information to government authorities if we have a reasonable belief that a situation involves abuse, neglect or domestic violence.

Judicial and Administrative Proceedings. We may release your health information for judicial and administrative proceedings. Such proceedings would include responses to court orders or subpoenas. Like most other disclosures in this category, certain requirements, would need to be met prior to our disclosure to ensure that your privacy is protected.

Workers' Compensation. We may release your health information for the purpose of processing and adjudicating workers' compensation claims.

For Specialized Government Functions. We may disclose your information if you are a member of the military as required by military authorities. This would also include release for foreign military personnel. Additionally, we may disclose your information to federal officials for national security reasons as authorized by law.

Law Enforcement Purposes. We may disclose your information if it would assist the law enforcement agent in locating material witness to a crime.

Planning of Health Care Services. We may disclose your health information to assist local health partnerships established by law to plan and ensure health care services. For example, we may provide your information to assist the partnerships in identifying common diseases in a certain community and providing treatment to improve the health of the community.

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