



## NOTICE OF PRIVACY PRACTICES AND RIGHTS

THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION.

### PLEASE REVIEW IT CAREFULLY

If you have any questions about this notice, please contact the CarePoint, P.C. Privacy Official using the contact telephone number provided at the end of this Notice of Privacy Practices.

Each time you visit a physician or other healthcare provider, a record of your visit is made. Typically, this record contains your symptoms, examination and test results, diagnoses, treatment, a plan for future care or treatment and billing-related information. This notice applies to all of the records of your care generated by CarePoint, P.C. and/or its affiliates and CarePoint Neurosurgery, a division of CarePoint, P.C. (hereinafter collectively referred to as ("CarePoint")), whether made by CarePoint personnel, agents or your physician.

#### 1. Privacy Responsibilities.

CarePoint is required by law to maintain the privacy of your health information, provide you a description of our privacy practices, and to notify you following a breach of unsecured protected health information. CarePoint will comply with the terms of this Notice of Privacy Practices.

#### 2. Uses and Disclosures of Protected Health Information.

The following categories describe examples of the way we use and disclose health information:

- a. **Authorization By You or Your Legal Representative:** CarePoint may obtain, use or disclose/release health information about you if you or your legal representative provides CarePoint an Authorization for Release of Health Information that complies with the requirements of state and/or federal law. You may contact your CarePoint physicians' office to obtain a form that may be used to authorize the release of your health information.
- b. **Treatment Purposes:** CarePoint may obtain and use health information about you to provide medical treatment or services to you. CarePoint may disclose health information about you to physicians, non-physician healthcare providers, technicians, health care facilities and other healthcare providers who are involved in providing medical care and treatment to you or coordinating your medical care. CarePoint may also provide other physicians or a subsequent healthcare provider with copies of various reports that should assist him/her in providing medical care and treatment to you.

- c. **Payment Purposes:** CarePoint may use and disclose health information about your treatment and services to bill and collect payment from you, your insurance company or a third-party payer. CarePoint may also tell your health plan about treatment you are going to receive to determine whether your plan will cover it.
- d. **Health Care Operations:** CarePoint may use information in your health record to assess the care and outcomes in your case and others like it. The results will then be used to continually improve the quality of care for all patients CarePoint serves. CarePoint may also disclose information for educational purposes, quality improvement, research and other operational purposes. CarePoint may remove information that identifies you from this set of health information to protect your privacy.

CarePoint may also use and disclose health information for the following purposes:

- To remind you that you have an appointment for medical care;
- To assess your satisfaction with our services;
- To tell you about possible treatment alternatives;
- To tell you about health-related benefits or services;
- For population based activities relating to improving health or reducing health care costs;
- For conducting training programs or reviewing competence of health care professionals;
- To a Medicaid eligibility database and the Children's Health Insurance Program eligibility database, as applicable;
- For other purposes permitted under state or federal law, or to which you have consented.

When disclosing information, primarily appointment reminders and billing/collections efforts, CarePoint may leave messages on your answering machine/voice mail.

- e. **Business Associates:** There are some services provided through contracts between CarePoint and business associates. When these services are contracted, we may disclose your health information to our business associates so that they can perform the job we've asked them to do and bill you or your third-party payer for services rendered. To protect your health information, however, business associates are required by federal law to appropriately safeguard your information.
- f. **Individuals Involved in Your Care or Payment for Your Care and/or Notification Purposes:** CarePoint may release health information about you to a friend or family member who is involved in your medical care or who helps pay for your care or to notify, or assist in the notification of (including identifying or locating) a family member, your personal or legal representative, or another person responsible for your care of your location and general condition. In addition, CarePoint may disclose health

information about you to an entity assisting in a disaster relief effort in order to assist with the provision of this notice.

- g. Research:** The use of health information is important to develop new knowledge and improve medical care. CarePoint may use or disclose health information for research studies but only when they meet all federal and state requirements to protect your privacy (such as using only de-identified data whenever possible). You may also be contacted to participate in a research study.
- h. Future Communications:** CarePoint may communicate to you via newsletters, mail outs or other means regarding treatment options, health related information, disease-management programs, wellness programs, research projects, or other community-based initiatives or activities in which CarePoint is participating.
- i. Health Information Exchange/Regional Health Information Organization:** Federal and state laws may permit CarePoint to participate in organizations with other healthcare providers, insurers, and/or other health care industry participants and their subcontractors in order for these individuals and entities to share your health information with one another to accomplish goals that may include but not be limited to: improving the accuracy and increasing the availability of your health records; decreasing the time needed to access your information; aggregating and comparing your information for quality improvement purposes; and such other purposes as may be permitted by law.
- j. As Required or Permitted By Law, Court Order, Subpoena or Search Warrant:** CarePoint may disclose information when required to do so by local, state or federal law.

CarePoint may also use and disclose health information for the state and/or federal agencies, entities or representatives, including but not limited to:

- Food and Drug Administration;
- Public Health or Legal Authorities charged with preventing or controlling disease, injury or disability;
- Correctional Institutions;
- Workers Compensation Agents;
- Organ and Tissue Donation Organizations;
- Military Command Authorities;
- Health Oversight Agencies;
- Funeral Directors and Coroners;
- National Security and Intelligence Agencies;
- Protective Services for the President and Others;

- A person or persons able to prevent or lessen a serious threat to health or safety.

CarePoint may disclose health information to a law enforcement official as required or permitted by law. In addition, CarePoint may disclose protected health information as permitted by law in connection with judicial or administrative proceedings, such as in response to a court order, search warrant or subpoena.

- k. Authorization Required for Specific Purposes:** CarePoint must obtain the written authorization of you or your legal representative in order to use or disclose psychotherapy notes, use or disclose your protected health information for marketing purposes, or to sell your protected health information.
- l. State-Specific Requirements:** Many states have requirements for reporting health care information. Some states, including Colorado, have separate privacy laws that have additional legal requirements or restrictions. If the state privacy laws are more stringent than federal privacy laws, the state law preempts the federal law.

### **3. Your Health Information Rights.**

Although your health record is the physical property of the healthcare practitioner or facility that compiled it, you have the following **rights concerning your health information**:

- **Inspection and Copy:** You have the right to inspect and obtain a copy of the health information that may be used to make decisions about your care. Usually, this includes medical and billing records, but does not include psychotherapy notes. We may deny your request to inspect and copy in certain very limited circumstances. If you are denied access to health information, you may request that the denial be reviewed. Another licensed health care professional chosen by CarePoint will review your request and the denial. The person conducting the review will not be the person who denied your request. CarePoint will comply with the outcome of the review.
- **Amend:** If you feel that the health information we have about you is incorrect or incomplete, you may ask CarePoint to amend the information. You have the right to request an amendment for as long as the information is kept by CarePoint. Any request for an amendment must be sent in writing to CarePoint's Privacy Official. CarePoint may deny your request for an amendment and if this occurs, you will be notified of the reason for the denial.
- **An Accounting of Disclosures:** You have the right to request an accounting of disclosures. This is a list of certain disclosures CarePoint makes of your health information for the purposes other than treatment, payment or health care

operations where an authorization was not required. If you wish to request an accounting of disclosures, please submit a written request to CarePoint's Privacy Official.

- **Request Restrictions:** You have the right to request a restriction or limitation on the health information we use or disclose about you for treatment, payment or health care operations. You also have the right to request a limit on the health information we disclose about you to someone who is involved in your care or the payment for your care, like a family member or friend. Any request for a restriction must be sent in writing to CarePoint's Privacy Official.

We are required to agree to your request **only** if 1) except as otherwise required by law, the disclosure is to your health plan and the purpose is related to payment or health care operations (and not treatment purposes), **and** 2) your information pertains solely to health care services for which you have paid in full. **For other requests, we are not required to agree.** If we do agree, we will comply with your request unless the information is needed to provide your emergency treatment.

- **Request Confidential Communications:** You have the right to request that we communicate with you about medical matters in a certain way or at a certain location. For example, you may ask that we contact you at work instead of your home. CarePoint will grant reasonable requests for confidential communications at alternative locations and/or via alternative means only if the request is submitted in writing and the written request includes a mailing address where the individual will receive bills for services rendered by the facility and related correspondence regarding payment for services. Please realize, we reserve the right to contact you by other means and at other locations if you fail to respond to any communication from us that requires a response. We will notify you in accordance with original request prior to attempting to contact you by other means or at another location.
- **Copy of This Notice:** You have the right to a paper copy of this notice. You may ask CarePoint to give you a copy of this notice as any time. Even if you have agreed to receive this notice electronically, you are still entitled to a paper copy of this notice.

If your physician's office or a CarePoint affiliate has a website you may print or view a copy of the notice by clicking on the Notice of Privacy Practices link.

To exercise any of your right, please obtain the required forms from your physician's office, CarePoint or CarePoint Privacy Official and submit your request in writing.

#### **4. CHANGES TO THIS NOTICE.**

CarePoint reserves the right to change this Notice of Privacy Practices and Right and the revised or changed notice will be effective for information we already have about you as well as any information we receive in the future. The current notice will be posted in the facility and on our website and include the effective date. In addition, each time you register at or are admitted to the facility for treatment or health care services as an inpatient or outpatient, we will offer you a copy of the current notice in effect.

#### **5. COMPLAINTS.**

If you believe your privacy rights have been violated, you may file a complaint with CarePoint, P.C. and/or its affiliates, by following the process outlined in CarePoint's Patient Rights documentation. You may also file a complaint with the Secretary of the Department of Health and Human Services. All complaints must be submitted in writing.

#### **YOU WILL NOT BE PENALIZED IN ANY WAY FOR FILING A COMPLAINT.**

#### **6. OTHER USES OF HEALTH INFORMATION.**

Other uses and disclosures of health information not covered by this notice or the laws that apply to CarePoint, P.C. and/or its affiliates, will be made only with the written authorization of you or your legal representative. If you or your legal representative, as applicable, provide us permission to use or disclose health information about you, you or your legal representative, as applicable, may revoke that authorization, in writing, at any time. If you or your legal representative, as applicable, revoke your authorization, we will no longer use or disclose health information about you for the reasons covered by your written authorization, except as otherwise required by law or court order. You understand that we are unable to take back any disclosures we have already made upon reliance on the authorization by you or your legal representative, as applicable, and that we are required to retain your records of the care that we provided to you.

#### **7. CAREPOINT PRIVACY OFFICIAL:**

Deborah Smith, Privacy Official  
CarePoint Health, LLC  
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(303)436-2720

Effective February 2014