

## Notice of Privacy and Information Practices

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*This notice describes how medical information about you may be used and disclosed for treatment, payment and health care operations and how you can gain access to this information. Please review it carefully.*

*This notice is effective May 1, 2011.*

### 1. **Uses and Disclosures of PHI**

Oncology Consultants (OC) may use your protected health information (PHI) for purposes of providing treatment, obtaining payment for treatment, and conducting health care operations. Your PHI may be used or disclosed only for these purposes unless the practice has obtained your authorization or the use or disclosure is otherwise permitted by the HIPAA privacy regulations or state or federal law. Your authorization may be revoked at any time. Revocation must be in writing.

#### A. **Treatment**

OC may use and disclose your PHI to provide, coordinate, or manage your health care and related services. This may include, but is not limited to, the coordination or management of your health care with a third party for treatment purposes. Examples of these may include, but are not limited to, pharmacies to fill a prescription, to a laboratory or diagnostic services provider to order tests, referral to support services, referral to other providers for treatment and other physicians who may be treating you.

#### B. **Payment**

OC may use and disclose your PHI to bill and collect payment for the services provided to you. This may include, but is not limited to, disclosure to your health insurance company to get authorization for treatment, to determine whether you are eligible for benefits or whether a particular service is covered under your health plan, to demonstrate medical necessity of services or as required by your insurance plan for utilization review. We may also disclose PHI, such as demographic information, to another provider involved in your care for the other provider's payment activities. We may disclose PHI, such as demographic information, to a collection agency.

#### C. **Health Care Operations**

OC may use and disclose your PHI for our own health care operations to facilitate the functions of this practice and provide quality care to all patients. Healthcare operations may include, but are not limited to, quality improvement and assessment activities and review and auditing of records including compliance reviews, medical reviews and legal services, training programs including those in which students, trainees or practitioners in health care learn under supervision, as well as business management and general administrative activities.

#### D. **Other Uses and Disclosures**

OC may, as part of treatment, payment and health care operations use or disclose your PHI for the following purposes: to remind you of your appointment, to inform you of potential treatment options or alternatives, to contact you after your treatment as part of our follow-up practices and to inform you of health-related benefits or services that may be of interest to you. If you do not wish to be contacted, please contact our Privacy Officer in writing.

### 2. **Uses and Disclosures Beyond Treatment, Payment and Health Care operations Permitted Without Authorization or Opportunity to Object.** OC is permitted or required to use or disclose protected health information without the individual's written authorization in certain circumstances. Two examples of this are:

A. **When Legally Required.** OC will disclose your PHI when we are required to do so by any state, federal or local law.

B. **When There Are Risks to Public Health.** OC may disclose your PHI for public activities and/or purposes such as, but not limited to:

- To prevent, control or report disease, injury, or disability as permitted by law
- To report vital events such as birth or death as permitted or required by law
- To conduct public health surveillance, investigations, and interventions as permitted or required by law
- To collect or report adverse events and product defects, track FDA regulated products, enable product recalls, repairs or replacements to the FDA.

### 3. **Uses and Disclosures Permitted Without Authorization But With Opportunity to Object.** OC may disclose your PHI to your family member or friend who is involved in your medical care. We may also give information to someone who helps pay for your care. We may

also tell your family or friends the condition that you are in. You will be provided a form to list specific people who we may speak to regarding your medical care. In addition, we may disclose protected health information about you to an entity assisting in a disaster relief effort so that your family can be notified about your condition, status and location.

#### **4. Your rights regarding your protected health information**

- A. The right to inspect and copy your PHI.** You have the right to inspect and copy protected 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, information compiled in reasonable anticipation of or use in a civil, criminal or administrative action or proceeding, or PHI that is subject to or exempt from the Clinical Laboratories Act of 1988. To inspect and copy protected health information that may be used to make decisions about you, you must submit your request in writing to the Privacy Officer listed below. If you request a copy of the information, we may charge a fee for the costs of copying, mailing or other supplies associated with your request.
- B. The right to request amendments to your PHI.** If you feel the protected health information we have about you is incorrect or incomplete, you may ask us to amend the information. You have the right to request an amendment for as long as the information is maintained in the designated record set. To request an amendment, your request must be made in writing and submitted to the Privacy Officer listed below. You must provide a reason that supports your request. We may deny your request if it is not in writing or does not include a reason to support the request. In addition, we may deny your request if you ask us to amend information that was not created by us, is not part of the protected health information kept by us, is not part of the information which you would be permitted to inspect and copy, or is accurate and complete. If you are denied access to protected health information, you may request that the denial be reviewed. Another licensed health care professional chosen by or organization will review your request and denial. The person conducting the review will not be the person who denied your request and we will comply with the outcome of the review.
- C. The right to request an accounting of disclosures.** This would be a list of the disclosures we made of your PHI that was not made for treatment, payment or healthcare operations. There are certain exceptions to this right. You must submit your request in writing to the Privacy Officer listed below. Your request must state a time period, which may not be longer than six years and may not include dates before April 14, 2003. Your request should indicate in what form you want the list (for example on paper or electronically). The first list you request within a 12 month period will be free. For additional lists, we may charge you for the costs of providing the list. We will notify you of the cost involved and you may choose to withdraw or modify your request at that time, before any costs are incurred. The account must be provided to you no later than 60 days after the receipt of your request, unless we utilize the 30-day extension period.
- D. The right to request a restriction on uses and disclosures of your PHI.** You have a right to request a limit on the PHI we disclose about you to someone who is involved in your care or the payment of your care, such as a family member or friend. We are not required to agree to your request. If we do agree, we will comply with your request unless the information is needed to provide you emergency treatment. To request restrictions, you must make your request in writing to the Privacy Officer listed below. Your request must tell us the specific restriction requested and to whom you want the restriction to apply. Either party can terminate the restriction upon notification of the other.
- E. The right to request we communicate with you about medical matters in an alternative manner or alternative location.** For example, you can ask that we only contact you at work or by mail. To request confidential communications, you must make your request in writing to the Privacy Officer listed below. We will not ask the reason for your request. We will accommodate all reasonable requests. Your request must specify how or where you wish to be contacted.

#### **5. Our Duties**

- A.** OC will abide by the terms of this notice or the notice currently in effect at the time of the disclosure
- B.** OC reserves the right to change the terms of this notice and to make new notice provisions effective for all protected health information that it maintains
- C.** OC will provide each patient with a copy of any revision of this Notice of Privacy and Information Practices at the time of their next visit, or at their last known address if there is a need to use or disclose any protected health information of the patient. Copies of this notice may also be obtained at any time at our offices or on our web site.
- D.** Any person/patient may file a complaint to the practice and to the Department of Health and Human Services, Office of Civil Rights if they believe their privacy rights have been violated. To file a complaint with the practice, please contact the Compliance Officer at the following address and/or telephone number:
  - ATTN: Compliance Officer
  - Oncology Consultants
  - 902 Frostwood, Suite 315
  - Houston, TX 77024
  - 713-800-0660
- E.** It is OC policy that no retaliatory action will be made against any individual who submits or conveys a complaint of suspected or actual non-compliance of the privacy standards.
- F.** Further information regarding matters covered by this notice can be directed to the Compliance Officer as listed above.