



NOTICE OF PRIVACY PRACTICES

Effective October 1, 2014

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Introduction

This Notice of Privacy Practices (“Notice” or “Privacy Notice”) is from Innate Medicine MD. Innate Medicine MD is committed to protecting your privacy, confidentiality, and other rights under the law, including:

- Keeping your health information private and confidential as required by law
- Distributing this Notice to you
- Following and abiding by the terms of the Notice, as currently in effect, with respect to how health information is used and/or disclosed

It is also for that reason that Innate Medicine MD is committed to complying with specific federal regulations on the privacy, confidentiality and other rights of Patients. These federal regulations are formally known as the Privacy Standards and Implementation Specifications of the Health Insurance Portability and Accountability Act (“HIPAA”). They are referred to in this Notice as the “HIPAA Privacy Rules”. Innate Medicine MD generally will be subject to the HIPAA Privacy Rules whenever it deals with individual health information of Patients. For purposes of this Notice, such information is referred to as “Protected Health Information”. Under the HIPAA Privacy Rules, Innate Medicine MD generally may treat the duly-

authorized and legal personal representative of the Patient as if such person were the Patient. Therefore, for purposes of the Notice, the terms “you” or “your” generally should be understood to include not only the Patient, but also the personal representative under the law.

Changes To This Notice

Innate Medicine MD reserves the right to change the terms of this Notice and policies relating to it at any time, as permitted by the HIPAA Privacy Rules. Innate Medicine MD reserves the right to apply such changes to information it already holds, as well as to new information after the change occurs. Before Innate Medicine MD makes a significant change in its Notice, they shall act in good faith to distribute any revised Notice to Patients. You may receive a copy of the Notice, as currently in effect, at any time by requesting it from Innate Medicine MD' Privacy Officer listed below.

Using/Disclosing Protected Health Information

Innate Medicine MD may use and disclose Protected Health Information about you for **treatment, care and services** (such as to evaluate, diagnose, and treat patients); **payment** (such as requesting reimbursement for services from private payers or Medicare and Medicaid); and for **health care operations** (such as providing quality patient care, and other matters that are necessary for Innate Medicine MD to carry out its traditional health care functions).

We may use or disclose Protected Health Information about you **without** your prior authorization under certain instances, including for certain: **public health purposes; law enforcement purposes; in response to court orders; for FDA reporting issues; organ and tissue donation purposes; emergency circumstances; workers' compensation matters and other permissible reasons.**

In some circumstances, we are permitted to use information about you for marketing communication purposes.

Upon providing you with the opportunity to agree or object to the disclosure, we also may disclose health information about you to **inform a friend or family member who is involved in your care** or to **notify disaster relief authorities** to alert family members of your location and condition.

We reserve the right to use or disclose Protected Health Information to schedule appointments. We also may use or disclose Protected Health Information for purposes of explaining alternative treatments to you; or to inform you of any other health related benefits that may be of interest to you.

In addition to complying with HIPAA Privacy Rules when using or disclosing Protected Health Information, Innate Medicine MD is committed to abiding by those other applicable federal/state laws that are not otherwise invalidated, including those which are more strict than the HIPAA Privacy Rules.

Rights Regarding Protected Health Information

In most cases, **you have the right to request in writing and gain access to health information** about you that we maintain to provide treatment, care and services to you. If you request copies, we may charge a reasonable cost-based fee for copying, mailing, labor/services or other related supplies, to the extent permitted under State law. If we deny your request to review or obtain access, you generally have the right to submit a written request for a review of that decision.

If you believe that information in you records is incorrect or if you believe important information is missing, **you have the right to request that we correct the records** by submitting a request in writing that provides your reason for requesting the amendment. We reserve the right to deny your request to amend a record if we did not create the information; if it is not part of the medical information that we maintain; or if we determine that the record is accurate.

In certain circumstances, **you have the right to list of those instances where we have disclosed health information about you**, other than for traditional treatment/health care, payment, health care operations or where you specifically authorized a disclosure. The request must be in writing and state the time period desired for the accounting, which must be less than a six-year period and start on or after October 1, 2014. You may receive the list in paper or electronic form. The first disclosure list request in a 12-month period is free. A fee will be charged for additional requests according to the law. We will inform you of the costs before you incur them.

Innate Medicine MD has instituted a Privacy Compliance Program to protect and ensure the privacy and confidentiality rights of Patients, as well as to recognize the access, amendment and accounting rights of patients with respect to their Protected Health Information. You may request to review this Privacy Compliance Program at any time by contacting Innate Medicine MD' privacy officer listed below.

You have the right to request that health information about you be communicated to you in a confidential manner (such as sending mail to an address other than your home) by notifying us in writing of the specific way or location for us

to use to communicate with you. You also have the right to request additional restrictions on how your Protected Health Information is used or disclosed.

We may deny any such requests in accordance with the provisions of the HIPPA Privacy Rules.

Other Uses of Medical Information

In other situations, as required by the HIPAA Privacy Rules, we will ask for your written authorization before using or disclosing your health information. You may later revoke that authorization by notifying us in writing of your decision to do so.

Complaints

If you have any questions or complaints about how Innate Medicine MD handles your health information, you may contact our Privacy Officer, as follows: Dr. Josefa Rangel, Innate Medicine MD, LLC 465 Miler Avenue, Mill Valley, CA 94941 P(415) 380-7970 F (877) 992-3213

You also may send a written complaint to the U.S. Department of Health and Human Services Office of Civil Rights (OCR) at 200 Independence Ave., Washington, D.C. 20201 or call them at (202) 619-0257.

You will not be retaliated against for registering or filing a complaint with us or OCR in good faith.