



NOTICE OF PRIVACY PRACTICES

Effective Date: January 1, 2010

This Notice Describes:

1. **How Medical Information About You May Be Used and Disclosed**
2. **How You Can Get Access to This Information.**

PLEASE REVIEW IT CAREFULLY.

We understand the importance of privacy and are committed to maintaining the confidentiality of your medical information. We make a record of the medical care we provide and may receive such records from others. We use these records to provide or enable other health care providers to provide quality medical care, to obtain payment for services provided to you as allowed by your health plan and to enable us to meet our professional and legal obligations to operate this medical practice properly. We are required by law to maintain the privacy of protected health information, to provide individuals with notice of our legal duties and privacy practices with respect to protected health information, and to notify affected individuals following a breach of unsecured protected health information. This notice describes how we may use and disclose your medical information. It also describes your rights and our legal obligations with respect to your medical information. If you have any questions about this Notice, please contact our Privacy Officer.

Komin Medical Group's Protection of Protected Health Information

Under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Komin Medical Group is required by law to maintain the privacy of health information that identifies you, which is called protected health information (PHI), and to provide you with notice of our legal duties and privacy practices regarding PHI. Komin Medical Group is committed to the protection of your PHI and will make reasonable efforts to ensure the confidentiality of your PHI as required by statute and regulation. We take this commitment seriously and will work with you to comply with your right to receive certain information under HIPAA.

How Komin Medical Group May Use or Disclose Your Health Information

The following categories explain the types of uses and disclosures of PHI that Komin Medical Group is permitted to make under HIPAA. Some of the uses and disclosures may be limited or restricted by state laws or other legal requirements. Please contact our Privacy Officer, using the information provided at the end of this notice, for specific information regarding applicable state laws.

Treatment. Komin Medical Group may use PHI to provide your medical care and treatment. We may disclose PHI to our employees and other health care professionals who are involved in coordinating or providing the care you need. For example, we may share your PHI with other physicians or other health care providers who will provide services that we do not provide. Or we may share this information with a pharmacist who needs it to dispense a prescription to you, or a laboratory that performs a test. We may also disclose PHI to members of your family or other authorized persons who can help you when you are sick or injured, or after you die.

Payment. Komin Medical Group may use and disclose your PHI to bill and obtain payment for the services we provide. For example, we may provide your health plan the information it requires before it will pay us. We may also disclose information to other health care providers to assist them in obtaining payment for services they have provided to you or to coordinate health care or health benefits.

Health Care Operations. Komin Medical Group may use and disclose your PHI for the operation of this medical practice. For example, we may use and disclose this information to review and improve the quality of care we provide, or the competence and qualifications of our professional staff. Or we may use and disclose this information to get your health plan to authorize services or referrals. We may also use and disclose this information as necessary for medical reviews, legal

services and audits, including fraud and abuse detection and compliance programs and business planning and management. We may contact you to give you information about products or services related to your treatment, case management or care coordination, or to direct or recommend other treatments, therapies, health care providers or settings of care that may be of interest to you. We may also share your medical information with our "business associates," such as our billing service, that perform administrative services for us. We have a written contract with each of these business associates that contains terms requiring them and their subcontractors to protect the confidentiality and security of your protected health information. We may also share your information with other health care providers, health care clearinghouses, or health plans that have a relationship with you.

Appointment Reminders. Komin Medical Group may use and disclose PHI to contact and remind you about appointments.

Business Associates. Komin Medical Group may disclose PHI to its business associates to perform certain business functions or provide certain business services to Komin Medical Group. For example, we may use another company to perform billing services on our behalf. All of our business associates are required to maintain the privacy and confidentiality of your PHI. In addition, at the request of your health care providers or health plan, we may disclose PHI to their business associates for purposes of performing certain business functions or health care services on their behalf. For example, we may disclose PHI to a business associate of Medicare for purposes of medical necessity review and audit.

SPECIAL SITUATIONS

Required by Law. Komin Medical Group must disclose PHI if required to do so by federal, state or local law, but we will limit our use or disclosure to the relevant requirements of the law. Komin Medical Group may, and is sometimes required by law, to disclose your PHI for law enforcement purposes, including reporting of certain types of wounds or physical injuries or in response to a court order, warrant, subpoena, summons or similar process authorized by law.

Judicial or Administrative Proceedings. Under certain circumstances, Komin Medical Group may disclose your PHI in the course of a judicial or administrative proceeding, including in response to a court or administrative order, subpoena, discovery request or other lawful purpose.

Public Health. Komin Medical Group may, and is sometimes required by law, to disclose your PHI to public health authorities for purposes related to: preventing or controlling disease, injury or disability; reporting child, elder or dependent adult abuse or neglect; reporting domestic violence; reporting to the Food and Drug Administration problems with products and reactions to medications; and reporting disease or infection exposure. When we report suspected elder or dependent adult abuse or domestic violence, we will inform you or your personal representative promptly unless in our best professional judgment, we believe the notification would place you at risk of serious harm or would require informing a personal representative we believe irresponsible for the abuse or harm.

Health Oversight Activities. Komin Medical Group may, and is sometimes required by law, to disclose your PHI to health oversight agencies during the course of audits, investigations, inspections, licensure and other proceedings, subject to the limitations imposed by law.

Coroners, Medical Examiners and Funeral Directors. Komin Medical Group may disclose PHI to a coroner, medical examiner, or funeral director for the purpose of identifying a deceased person, determining cause of death, or for performing some other duty authorized by law.

Correctional Institution. Komin Medical Group may disclose the PHI of an inmate or other individual when requested by a correctional institution or law enforcement official for health, safety, and security purposes.

Workers' Compensation. Komin Medical Group may disclose your PHI as necessary to comply with workers' compensation laws. For example, to the extent your care is covered by workers' compensation, we will make periodic reports to your employer about your condition. We are also required by law to report cases of occupational injury or occupational illness to the employer or workers' compensation insurer.

Change of Ownership. In the event that this medical practice is sold or merged with another organization, your health information/record will become the property of the new owner, although you will maintain the right to request that copies of your health information be transferred to another physician or medical group.

Government Functions. In certain situations, Komin Medical Group may disclose the PHI of military personnel and veterans, including Armed Forces personnel, as required by military command authorities. Additionally, we may disclose PHI to authorized officials for national security purposes, such as protecting the President of the United States, conducting intelligence, counter-intelligence, other national security activities, and when requested by foreign military authorities. Disclosures will be made only in compliance with U.S. Law.

Fundraising. Komin Medical Group may use or disclose your demographic information in order to contact you for our fundraising activities. If you do not want to receive these materials, notify the Privacy Officer listed at the top of this Notice of Privacy Practices and we will stop any further fundraising communications.

De-identified Information and Limited Data Sets: Komin Medical Group may use and disclose health information that has been “de-identified” by removing certain identifiers making it unlikely that you could be identified. Komin Medical Group also may disclose limited health information, contained in a “limited data set”. The limited data set does not contain any information that can directly identify you. For example, a limited data set may include your city, county and zip code, but not your name or street address.

INFORMATION BREACH NOTIFICATION

Komin Medical Group is required to provide patient notification if it discovers a breach of unsecured PHI unless there is a demonstration, based on a risk assessment, that there is a low probability that the PHI has been compromised. You will be notified without unreasonable delay and no later than 60 days after discovery of the breach. Such notification will include information about what happened and what can be done to mitigate any harm.

PATIENT RIGHTS REGARDING PHI

Subject to certain exceptions, HIPAA provides the following patient rights with respect to PHI : **Right to Request Confidential Communications.** You have the right to request that you receive your PHI in a specific way. For example, you may ask that we send information to a particular address or you may pick it up at our office. We will comply with all reasonable requests submitted in writing which specify how or where you wish to receive these communications.

Right to Inspect and Copy. You have the right to inspect and request a copy of your PHI, with limited exceptions. To access your medical information, you must submit in writing a request detailing what information you want to access. Information can be requested in hard copy or electronic format if it is readily producible. We will provide you with an alternative format you find acceptable. We will also send a copy to any other person you designate in writing. We will charge a reasonable fee which covers our costs for labor, supplies, postage, and if requested and agreed to in advance the cost of preparing an explanation or summary. We may deny your request under limited circumstances.

Right to Amend or Supplement. You have a right to request that we amend your PHI that you believe is incorrect or incomplete. You must make a request to amend in writing and include the reasons you believe the information is inaccurate or incomplete. We are not required to change your health information and will provide you with information about this medical practice's denial and how you can disagree with the denial.

Right to an Accounting of Disclosures. You have a right to receive an accounting of certain disclosures of your PHI made by this medical practice, except that this medical practice does not have to account for the disclosures provided to you or pursuant to your written authorization.

Right to a Paper or Electronic Copy of this Notice. You have a right to notice of our legal duties and privacy practices with respect to your PHI, including a right to a paper copy of this Notice of Privacy Practices, even if you have previously requested its receipt by e-mail.

Right to Request Limits on Uses and Disclosures of your PHI. You have the right to request that we limit: 1) how we use and disclose your PHI for treatment, payment, and health care operations activities; or 2) our disclosure of PHI to individuals involved in your care or payment for your care. Komin Medical Group will consider your request but is not required to agree to it unless the requested restriction involves a disclosure that is not required by law to a health plan for payment or health care operations purposes and not for treatment, and you have paid for the service in full out of pocket. If we agree to a restriction on other types of disclosures, we will state the agreed restrictions in writing and will abide by them, except in emergency situations when the disclosure is for purposes of treatment.

How to exercise your rights

To exercise any of your rights described in this notice, you must send a written request to: HIPAA Privacy Officer, Komin Medical Group, 1150 East Lerdo Hwy, Shafter, CA 93263. Patients may update insurance and/or billing information through our website or by contacting the Patient Billing Department using the phone number indicated on the billing invoice.

Changes to this Notice of Privacy Practices

Komin Medical Group reserves the right to make changes to this notice and to our privacy policies from time to time. When changes are made, we will promptly update this notice and post the information on our website. Until such amendment is made, we will comply with the terms of the notice of our privacy policies currently in effect. After an amendment is made, the revised Notice of Privacy Protections will apply to all protected health information that we maintain, regardless of when it was created or received.

How to Contact Us or File a Complaint

If you have questions or comments regarding our Notice of Privacy Practices, or have a complaint about our use or disclosure of your PHI or our privacy practice, please contact our Privacy Officer at (661) 630-5890 or send a written request to: HIPAA Privacy Officer, Komin Medical Group, 1150 East Lerdo Hwy, Shafter, CA 93263.

You may also file a complaint with the Secretary of the U.S. Department of Health and Human Services at the address listed below. Komin Medical Group will not take any retaliatory action against anyone for filing a complaint about our privacy practices.

Department of Health and Human Services
Office of Civil Rights
Hubert Humphrey Bldg.
200 Independence Avenue, SW
Room 509F HHH Building
Washington, D.C. 20201
OCRMail@hhs.gov

The complaint form may be found at www.hhs.gov/ocr/privacy/hipaa/complaints/hipcomplaint.pdf.