

Omnicare Medical Group

Notice of Privacy Practices

A Message from Omnicare Medical Group:

This Notice of Privacy Practices (“Notice”) explains how we may use your medical information, who we may share it with, and how to get a copy of your medical records.

OUR PROMISE REGARDING HEALTH INFORMATION

Omnicare Medical Group (“OMG”) is committed to protecting your protected health information (“PHI”). This Notice explains how we safeguard your PHI for all of the health services you receive at OMG:

- Laws to protect your PHI
- Your rights about your PHI
- How to file a privacy-related complaint

We will always notify you of any breach (unauthorized use) of unsecured PHI that affects you.

The State of California has protected categories of health information that are kept and handled in special ways. This includes: mental health treatment, developmental disabilities treatment, drug/alcohol abuse treatment, and HIV/AIDS treatment information. It also includes information about the treatment of minors consenting for reproductive health and pregnancy, mental health, substance abuse, sexually transmitted diseases, rape, or sexual assault-related services.

CHANGES TO NOTICE OF PRIVACY PRACTICES

OMG follows all the privacy practices in this Notice. We also have the right to change these practices. If we make important changes, we will provide you with an updated Notice during your next visit to OMG. You can get a copy of this Notice from any OMG site or get it online at www.OmnicareMedGroup.com.

HOW DOES OMG USE AND DISCLOSE PHI?

OMG will only use or share your PHI if it is needed to provide you with health services. Some of the information OMG uses and shares is as follows: your name, address, email, telephone numbers, health care history, health care provided to you, and the cost of your health care. The following are other examples of how OMG may use or disclose your PHI.

Treatment: OMG will use and share your PHI with doctors, hospitals, and others to provide, coordinate, or manage your health care and any related services. For example, we may need to use your PHI to get prior approval for certain services, to call you as a reminder about an upcoming appointment, or to follow your health changes.

Payment: OMG will use and share your PHI, as needed, to obtain or provide payment for your health care services. This may include sharing information with your insurance, provider, or personal representative who is responsible for making decisions about payment of services.

Health Care Operations: Your information may be used for general administrative purposes. For example, we may need to check how well we are providing services, as part of audits, to participate in programs to stop fraud, and for OMG planning needs.

Omnicare Medical Group

Notice of Privacy Practices

OTHER USES OF YOUR PHI

Marketing: Most uses and sharing of your PHI for marketing purposes would require your prior written authorization. There are some exceptions to marketing such as when a communication describes a health-related product or service, or an announcement of new providers or equipment.

Fundraising: OMG may contact you to provide information about OMG sponsored activities such as fundraising programs and events, grants, galas, auctions, or charity drives. The funds raised would be used to expand and improve the services and programs OMG can provide to the community. To do so, OMG may use your contact information such as your name, address, phone number, date of birth, physician name, outcome of your care, department where you received a service, and the dates you received treatment or services at OMG.

If you do not want to receive fundraising materials and would like to opt-out, please contact the OMG Patient Service Center at (888)499-9303, or respond to any communication with a request to opt-out. You are free to opt-out fundraising communications at any time, and your decision will have no impact on your treatment or payment for services.

To Individuals Involved in Your Care or Payment for Your Care: OMG may share PHI with family members or friends involved in decisions about your care, payment for care, or in the case of an emergency. You have the right to request that OMG not share some or all of this information. Please contact the OMG Privacy Officer at privacyoffice@omnicaremedgroup.com or the OMG site where you receive services to make a written request to not share PHI.

Required By Law: OMG may use or share your PHI if required by federal, state, or local law, or by court order or subpoena.

Public Health Activities: OMG may share your PHI with a public health authority in order to prevent or control disease, injury, or disability. For example, OMG may share proof of vaccines with a patient's school.

Research: OMG may share health information for research projects. All research projects follow state and federal laws that protect patient privacy. All research projects that require sharing PHI must be approved through a special review process to protect patient safety, welfare, and confidentiality. If the special review process approves sharing health information for a research project, other studies may also use this same information. Researchers may contact patients to participate in certain research studies. Patients will only be contacted if the special review process has given their approval. You do not need to participate in any research project. If you agree to participate, you will need to sign an authorization form.

To Avert a Serious Threat to Health or Safety: OMG may use and share your PHI if we believe it is necessary to avoid abuse, neglect, or a serious threat to your health or safety or to someone else's. We limit the information that is shared to that which is needed to respond to the emergency.

Deceased Individuals: OMG may use or share the PHI of a deceased individual after the individual has been deceased for 50 years.

Omnicare Medical Group

Notice of Privacy Practices

WHEN WRITTEN PERMISSION IS NEEDED

If OMG needs to share your PHI for a reason not explained in this Notice, we will first need your written permission unless required by law. You may cancel your authorization in writing at any time. If you cancel your authorization, we will no longer use or disclose your PHI for the purposes covered by your written authorization.

If you cancel your authorization, it will only effect new disclosures. You may contact the site that collected your authorization or the Privacy Office at privacyoffice@omnicaremedgroup.com to cancel the authorization.

WHAT ARE YOUR PRIVACY RIGHTS?

The following is a statement of your rights about your PHI and a brief description on how to exercise these rights.

You have the right to receive and review a copy of your PHI.

- You may receive and review a copy of your paper and electronic health records. Your health records include medical and billing records and any other records that we use for making medical decisions about your care.
- You have the right to receive your PHI in the format requested. If it is not available in that format, we will give it to you in another format.
- Please submit your requests to receive or review a copy of your PHI to OMG Health Information Management at recordrequest@omnicaremedgroup.com or the OMG site where you receive services.
- There may be a fee for providing you with your health records.
- Under some circumstances, your request to inspect or obtain a copy of your PHI may be denied. If your request is denied, you may request that the decision be reviewed.

You have the right to request a restriction on disclosures of your PHI.

- You may request that we limit our use of your PHI for treatment, payment, and health care operations purposes. We will review and consider your request.
- OMG does not have to agree to your request, unless it is to a health plan or insurer and you or someone on your behalf will be paying for all services out of pocket.
- To request a restriction or to revoke your authorization, you must make your request in writing to OMG Health Information Management at recordrequest@omnicaremedgroup.com. Your request must include what information you want to be restricted, whether you want to limit the use, disclosure, or both, whether you paid for services in-full, and/or to whom you want the limits to apply. **You have the right to request to receive confidential communications from us by alternative means or at an alternative location.**
- You have the right to ask OMG to contact you only in writing at a different address or post office box, or by email, text message, or telephone.
- To request a change in how you receive confidential communications, send a written request to the OMG Privacy Officer and specify how you wish to receive confidential communications.

Attention: Privacy Officer
Omnicare Medical Group
2040 Camfield Avenue
Los Angeles, CA 90040.

- OMG will accommodate all reasonable requests when necessary to protect your safety.

Omnicare Medical Group

Notice of Privacy Practices

You have the right to request an amendment to your PHI.

- If you believe there is a mistake in your PHI or that important information is missing, you may request that we correct or add to the record.
- To request a change, send a written request to OMG Health Information Management at recordrequest@omnicaremedgroup.com. You must tell us what corrections or additions you are requesting, and why the corrections or additions should be made. We will respond in writing after reviewing your request.
- If we approve your request, we will make the correction or addition to your PHI. If we deny your request, we will tell you why and explain your right to file a written statement of disagreement.
- OMG cannot change records that were not created by OMG, are not part of your health record, or have been gathered for legal purposes.
- OMG cannot change information that is determined to be accurate and complete.

You have the right to receive a list of when your PHI was shared.

- You have the right to request a list of organizations and places we shared your PHI with.
- This list will include whom we shared the information with, when we shared the information, the reason the information was shared, and a description of the information shared.
- This list will not include when information was shared with you, shared with your permission, shared for treatment, payment, or health care operations, and other exceptions authorized by law.
- To request an accounting of disclosures, you must submit your request in writing to OMG Health Information Management at recordrequest@omnicaremedgroup.com. Your request must include a time-frame that is less than six-years old.
- You may receive one list every 12-months for no charge. If you require additional lists, there may be a fee. OMG will inform you of this fee at the time you make your request.

You have the right to request a paper copy of this Notice of Privacy Practices.

- An electronic version of this Notice is on our website at www.OmnicareMedGroup.com.
- For a paper copy of this Notice, you may contact the Privacy Office at privacyoffice@omnicaremedgroup.com or the site where you received outpatient care.

Omnicare Medical Group Notice of Privacy Practices

HOW DO YOU CONTACT OMG TO USE YOUR RIGHTS?

If you want to use any of the privacy rights explained in this Notice, you may contact the OMG program or site from which you receive care or services. You may need to fill out a form to use your rights; if needed, we can help you fill out the form. Alternatively, you can call or write to us for assistance at:

Omnicare Medical Group
Attention: Privacy Officer
2040 Camfield Avenue Los Angeles, CA 90040
(310) 605-0000
privacyoffice@omnicaremedgroup.com

HOW DO YOU CONTACT OMG ABOUT YOUR PROTECTED HEALTH INFORMATION?

Omnicare Medical Group
Attention: Privacy Officer
2040 Camfield Avenue Los Angeles, CA 90040
(310) 605-0000
privacyoffice@omnicaremedgroup.com

HOW DO YOU CONTACT THE OMG PATIENT SERVICE CENTER?

(310) 605-0000

USE YOUR RIGHTS WITHOUT FEAR

We will not take retaliatory action against you if you file a complaint about our privacy practices.

COMPLAINTS/QUESTIONS

If you believe that we have not protected your privacy, you have the right to complain. You may file a complaint (or grievance) by calling or writing to us at the OMG address below. If you have any questions about this Notice and want further information, please contact our Privacy Officer at:

Omnicare Medical Group Attention:
Privacy Officer
2040 Camfield Avenue Los Angeles, CA 90040
(310) 605-0000
privacyoffice@omnicaremedgroup.com

Or, you may contact:
U.S. Department of Health and Human Services
Office for Civil Rights – Pacific Region
90 7th Street, Suite 4-100
San Francisco, CA 94103
Toll-Free Center: (800) 368-1019
Fax: (202) 619-3818
TDD: (800) 537-7697
Email: ocrmail@hhs.gov
www.hhs.gov/ocr/privacy/hipaa/complaints/