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Notice of Privacy Practices

Effective September 18th, 2014

This notice describes how your medical information may be used and disclosed by Georgia Kidney Consultants (GKC) and how you can get access to this information. PLEASE REVIEW IT CAREFULLY.

GKC Practices Regarding Protected Health Information (PHI):

This notice describes GKC practices regarding your PHI. The terms "we" and "our" in this notice refer to GKC.

This Notice of Privacy Practices is required by the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule. If you have any questions about this notice, please contact our office.

Our Responsibilities to You Regarding Your PHI:

The HIPAA Privacy Rule requires GKC to:

- Ensure that your PHI is properly safeguarded
- Notify you if we determine that your PHI was inappropriately used or disclosed
- Provide you this notice of our legal duties and privacy practices for the use and disclosure of your PHI
- Never use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Please notify our office in writing by writing, signing, and dating a letter to GKC.
- Follow the terms of the notice currently in effect

Our Right to Revise This Notice. We may change this notice and our privacy practices at any time. Any revised notice will apply to the PHI we already have about you at the time of the change and any PHI we create or receive after the change takes effect. We will advise you of important changes and post the revision on our website.

How to Obtain a Copy of This Notice. This notice is available in paper copy at our office, and is also available on our website. You can ask for a paper copy at your next appointment, or call and request that we mail a copy to you.

How GKC May Use or Disclose Your PHI:

- **Treatment:** We can use your health information and share it with other professionals who are treating you.
- Health Care Operations: We can use and share your health information to run our practice, improve your care, and contact you when necessary.
- **Billing:** We can use and share your health information to bill and get payment from health plans or other entities.

Other Ways GKC May Use and Disclose Your PHI: We are allowed or required to share your information in other ways – usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes.

- **Public Health and Safety Issues:** We can share health information about you for certain situations such as preventing disease, helping with product recalls, reporting adverse reactions to medications, reporting suspected abuse, neglect, or domestic violence, preventing or reducing a serious threat to anyone's health or safety.
- Research: We can use your information for health research
- **Compliance with the Law:** We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law.
- **Response to Organ and Tissue Donation Requests:** We can share health information about you with organ procurement organizations.
- Working with a Medical Examiner or Funeral Director: We can share health information with a coroner, medical examiner, or funeral director when an individual dies.
- Addressing Workers' Compensation, Law Enforcement, and Other Government Requests: We can use or share health information about you: For workers' compensation claims, for law enforcement purposes or with a law enforcement official, with health oversight agencies for activities authorized by law, for special government functions such as military, national security, and presidential protective services.
- **Response to Lawsuits and Legal Actions:** We can share health information about you in response to a court or administrative order, or in response to a subpoena.

Your Rights:

When it comes to your health information, you have certain rights. This section explains your rights and some of our responsibilities to help you. For entrusting our care with your PHI, you have the right to:

- **Request an Electronic or Paper Copy of Your Medical Records:** You can ask to see or get an electronic or paper copy of your medical record and other health information we have about you. Ask us how to do this. We will provide a copy or a summary of your health information, usually within 30 days of your request. GKC charges a reasonable, cost-based fee of \$0.50 per page requested.
- Ask Us to Correct Your Medical Record: You can ask us to correct health information about you that you think is incorrect or incomplete. Ask us how to do this. We may say "no" to your request, but we will tell you why in writing within 60 days.
- **Request Confidential Communications:** You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address. We will agree to all reasonable requests.
- Ask Us to Limit What We Use or Share: You can ask us not to use or share certain health information for treatment, payment, or our operations. We are not required to agree to your request, and we may say "no" if it would affect your care. If you pay for a service or health care item out-of-pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer. We will say "yes" unless a law requires us to share that information.
- Get a List of Those With Whom We've Shared Information: You can ask for a list (accounting) of the times we've shared your health information for six years prior to the date you ask, who we shared it with, and why. We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We'll provide one accounting a year for free but will charge a reasonable, cost-based fee if you ask for another one within 12 months.

Your Rights continued:

- Get a Copy of This Privacy Notice: You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.
- Choose Someone to Act for You: If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information. We will make sure the person has this authority and can act for you before we take any action.

• File a Complaint if You Feel Your Rights are Violated: You can complain if you feel we have violated your rights by contacting our office or in writing by writing, signing, and dating a letter to GKC. You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201,

We will not retaliate against you for filing a complaint.

Your Choices:

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

In these cases, you have both the right and choice to tell us to:

- Share information with your family, close friends, or others involved in your care
- Share information in a disaster relief situation
- Include your information in a hospital directory
- Contact you for fundraising efforts

In these cases we will never share your information unless you give us written permission:

- Marketing purposes
- Sale of your information

In the case of fundraising: We may contact you for fundraising efforts, but you can tell us not to contact you again.