Notice of Privacy Practices

Flu Busters, LLC P.O. Box 163685 Austin, TX 78716-3685 <u>Website</u>: www.texasflubusters.com <u>Email</u>: flubusters@sbcglobal.net

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

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.

Get a copy of your health and claims record

- * 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. We may charge a reasonable, cost-based fee.

Ask us to correct health and claims record

- * You can ask us to correct your health claim records if you think they are incorrect or incomplete. Ask us how to do this.
- * We may say "no" to your request, but we'll 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 say "yes" 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.

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 may charge a reasonable, cost-based fee if you ask for another one within 12 months.

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.

File a complaint if you feel your rights are violated

* If you feel we have violated your rights, you may file a complaint with Flu Busters, LLC Privacy officer by mail, email, or website link under "Contact us":

Mail: Flu Busters, LLC <u>Email</u>: Flubusters@sbcglobal.net

Attn: Privacy Officer

P.O. Box 163685 Website: www.texasflubusters.com

Austin, TX 78716-3685

- * You can also 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, calling 1-877-696-6775, or visiting www.hhs.gov/ocr/privacy/hipaa/complaints/.
- * 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.
 - If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information when needed to lessen serious and imminent threat to health or safety.

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

- * Marketing purposes
- * Sale of your information
- * Most sharing of psychotherapy notes

Our Uses and Disclosures:

How do we typically use or share your health information? We typically use or share your health information in the following ways:

Help manage the health care treatment you receive

We can use your health information and share it with other professionals who are treating you.

Health Promotion and Disease Prevention

Flu Busters, LLC may use your health information to tell you about disease prevention and health care.

Run our organization

We can use and share your health information to run our organization, improve your care, and contact you when necessary. We use health information about you to develop better services for you.

Bill for your services

We can use and share your health information to bill and get payment from health plans or other entities. Example: We give information about you to your health insurance plan so it will pay for your services.

How else can we use or share you health information? We are allowed or required to share you 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. For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html

Help with 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

Do Research

* We can use or share your information for health research.

De-Identify your information

* We can use or share your data as long as we de-identify your health information

Comply with the law

* We will share information about you if state of 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.

Respond to organ and tissue donation requests and work with a medical examiner or funeral director

- * We can share health information about you with organ procurement organizations.
- * We can share health information with a coroner, medical examiner, or funeral director when an individual dies.

Address 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

Respond 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.

Our responsibilities

- * We are required by law to maintain the privacy and security of your protected health information.
- * We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- * We must follow the duties and privacy practices described in this notice and give you a copy of it.
- * We will not 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. Let us know in writing if you change your mind.
- * We do not share you information or provide it for fundraising.

For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html

Changes to the Terms of the Notice

* We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, and on our website.

Effective Date: August 3, 2016