



HIPAA NOTICE OF PRIVACY PRACTICES

Effective Date: 09/27/2010

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.

If you have any questions about this notice, please contact Amy Stachnik, Director of Client Services and Medical Compliance, 321-939-2396.

WHO WILL FOLLOW THIS NOTICE.

This notice describes Rippe Health's practices and that of:

- Any health care professional authorized to enter information into your chart.
- All departments and units of the clinic..
- All employees, staff and other clinic personnel.

OUR PLEDGE REGARDING MEDICAL INFORMATION:

We understand that medical information about you and your health is private. We are committed to protecting medical information about you. We create a record of the care and services you receive at Rippe Health. We need this record to provide you with quality care and to comply with certain legal requirements. This notice applies to all of the records of your care generated by Rippe Health, whether made by clinic personnel or your personal doctor. Your personal doctor may have different policies or notices regarding the doctor's use and disclosure of your medical information created in the doctor's office or clinic.

This notice will tell you about the ways in which we may use and disclose medical information about you. We also describe your rights and certain obligations we have regarding the use and disclosure of medical information.

We are required by law to:

- make sure that medical information that identifies you is kept private;
- give you this notice of our legal duties and privacy practices with respect to medical information about you; and

- follow the terms of the notice that is currently in effect.

HOW WE MAY USE AND DISCLOSE MEDICAL INFORMATION ABOUT YOU.

The following categories describe different ways that we use and disclose medical information. For each category of uses or disclosures we will explain what we mean and try to give some examples. Not every use or disclosure in a category will be listed. However, all of the ways we are permitted to use and disclose information will fall within one of the categories.

- **For Treatment.** We may use medical information about you to provide you with medical treatment or services. We may disclose medical information about you to doctors, nurses, technicians, hospitals or other clinic personnel who are involved in taking care of you at Rippe Health. For Example, the doctor may need to tell the dietitian if you have diabetes so that we can arrange for appropriate meals. Different departments of Rippe Health also may share medical information about you in order to coordinate the different things you need, such as prescriptions, lab work and consultations. We also may disclose medical information about you to people outside Rippe Health who may be involved in your medical care, such as the Hospital you go to for testing.

- **For Payment.**

Rippe Health Evaluation: We may use and disclose medical information about you so that the treatment and services you receive at Rippe Health may be billed to and payment may be collected from you, an insurance company or a third party (we will never disclose specific personal or health information to your employer unless we have written authorization from you. However we will disclose specific personal or health information to your employer if your employer is the one paying for the services). For example, we may share necessary information with our representatives involved in the billing process (including but not limited to claims representatives, clearinghouses, and billing companies). We may send you or a third party a bill and the information on or accompanying the bill may include information that identifies you, as well as your diagnosis, procedures and services rendered

Stipend Payment/Rippe Lifestyle Institute: We may use and disclose information about you so that you may receive a stipend for your research study participations

- **For Health Care Operations.** We may use and disclose medical information about you for ongoing operations at Rippe Health. These uses and disclosures are necessary to run the clinic and make sure that all of our patients receive quality care. For example, we may use medical information

to review our treatment and services and to evaluate the performance of our staff in caring for you. We may also combine medical information about many clinic patients to decide what additional services Rippe Health should offer and what services are not needed.

- **In Order to Contact You.** We may contact you to remind you that you have an appointment at our office; to inform you about test results; to clarify information you have provided; or to tell you about research studies, products or services that might interest you. Please notify us if you do not wish to be contacted for appointment reminders or if you do not wish to receive communications about research studies or health-related products and services. If you advise us in writing (at the address listed at the top of this notice) that you do not wish to receive such communications, we will not use or disclose your information for these purposes.

You may revoke your authorization at any time by giving us written notice. Your revocation will be effective when we receive it, but it will not apply to any uses and disclosures that occurred before that time.

If you revoke your authorization, we will not be permitted to use or disclose information for purposes of treatment, payment, or office operations, and we may therefore choose to discontinue your participation in our research studies and any related health care treatments and services.

- **Treatment Alternatives.** We may use and disclose medical information to tell you about or recommend possible treatment options or alternatives that may be of interest to you.
- **Health-Related Benefits and Services.** We may use and disclose medical information to tell you about health-related benefits or services that may be of interest to you.
- **Research.** Under certain circumstances, we may use and disclose medical information about you for research purposes. For example, a research project may involve comparing the health and recovery of all patients who received one medication to those who received another, for the same condition. All research projects, however, are subject to a special approval process. This process evaluates a proposed research project and its use of medical information, trying to balance the research needs with patients' need for privacy of their medical information. Before we use or disclose medical information for research, the project will have been approved through this research approval process, but we may, however, disclose medical information about you to people preparing to conduct a research project, for example, to help them look for patients with specific medical needs, so long as the medical information they review does not leave the hospital. We will almost always ask for your specific permission if the researcher will have

access to your name, address or other information that reveals who you are, or will be involved in your care at the clinic.

We may use and disclose information about you to organizations that sponsor our research, organizations that monitor our research, ethical review boards, and to the FDA upon request.

- **As Required By Law.** We will disclose medical information about you when required to do so by federal, state or local law.
- **To Avert a Serious Threat to Health or Safety.** We may use and disclose medical information about you when necessary to prevent a serious threat to your health and safety or the health and safety of the public or another person. Any disclosure, however, would only be to someone able to help prevent the threat.
- **Emergency Situations:** We may disclose health information in emergency situations as directed by your Rippe Health physician.
- **Workers' Compensation.** We may release medical information about you for workers' compensation or similar programs. These programs provide benefits for work-related injuries or illness.
- **Lawsuits and Disputes.** If you are involved in a lawsuit or a dispute, we may disclose medical information about you in response to a court or administrative order. We may also disclose medical information about you in response to a subpoena, discovery request, or other lawful process by someone else involved in the dispute, but only if efforts have been made to tell you about the request or to obtain an order protecting the information requested.
- **Information Not Personally Identifiable.** We may use or disclose health information about you in a way that does not personally identify you or reveal who you are.

YOUR RIGHTS REGARDING MEDICAL INFORMATION ABOUT YOU.

Although your health record is the physical property of Rippe Health, the information belongs to you and you have the following rights regarding your information:

- **Right to Inspect and Copy.** You have the right to inspect and copy medical information that may be used to make decisions about your care. Usually, this includes medical and billing records.
- **Right to Amend.** If you feel that medical information we have about you is incorrect or incomplete, you may ask us to amend the information. We will

notify you if we are unable to grant your request to amend your health record.

- **Right to an Accounting of Disclosures.** You have the right to request an "accounting of disclosures." This is a list of the disclosures we made of medical information about you other than for treatment, payments and health care operations.
- **Right to Request Restrictions.** You have the right to request a restriction or limitation on the medical information we use or disclose about you for treatment, payment or health care operations as to certain persons involved in your care or the payment for your care and as provided by law, like a family member or friend.
- **Right to Revoke:** You have the right to revoke your consent or authorization to use or disclose health information except to the extent that action has already been taken in reliance on your consent or authorization. If you provide us permission to use or disclose medical information about you, you may revoke that permission, in writing, at any time. If you revoke your permission, we will no longer use or disclose medical information about you for the reasons covered by your written authorization. You understand that we are unable to take back any disclosures we have already made with your permission, and that we are required to retain our records of the care that we provided to you.
- **Right to Request Confidential Communications.** You have the right to request that we communicate with you about medical matters in a certain way or at a certain location. For example, you can ask that we only contact you at work or by mail. .
- **Right to a Paper Copy of This Notice.** You have the right to a paper copy of this notice. You may ask us to give you a copy of this notice at any time. Even if you have agreed to receive this notice electronically, you are still entitled to a paper copy of this notice.

You may obtain a copy of this notice at our website, www.RippeHealth.com

To obtain a paper copy of this notice, please visit our office at 215 Celebration Place, Suite 300, Celebration, Florida 34747.

CHANGES TO THIS NOTICE

- We reserve the right to change this notice. We reserve the right to make the revised or changed notice effective for medical information we already have about you as well as any information we receive in the future. We will post a copy of the current notice at the clinic. The notice will contain on the first page, in the top right-hand corner, the effective date. In addition, each time

