



Phone: (916) 332-1210 Fax: 916-332-0207
5900 Coyle Avenue, Suite A, Carmichael, CA 95608

NOTICE OF PRIVACY PRACTICE

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.

(EFFECTIVE JANUARY 1ST, 2019) TOTAL PAGES 5

Patient Name: _____ DOB: _____

All Inclusive Medical Services Inc. – AIMS Inc. Notice of Privacy Practices

Under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), AIMS Inc. is required by law to maintain the privacy of health information that identifies you, protected health information (PHI), and provide you with notice of your legal duties and privacy practices regarding PHI. AIMS Inc. 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.

AIMS Inc. Use and Disclosure of PHI

As permitted under HIPAA, the following categories explain the types of uses and disclosures of PHI that AIMS Inc. may make. Some of the uses and disclosures described may be limited or restricted by state laws or other legal requirements, for example, The Clinical Laboratory Improvement Amendments of 1988 (CLIA). Please contact our Privacy Officer using the contact information provided at the end of this notice for specific information regarding your state.

- **For Treatment** – AIMS Inc. may use or disclose PHI for treatment purposes, including disclosure to physicians, nurses, medical students, pharmacies, and other healthcare professionals who provide you with healthcare services and or are involved in the coordination of your care, such as providing your physician your laboratory results.
- **For Payment** – AIMS Inc. may use or disclose PHI to bill and collect payment for laboratory or genetic counseling services we provide. For example, AIMS Inc. may provide PHI to your health plan to receive payment for the services rendered to you.
- **For Health Care Operations** – AIMS Inc. may use or disclosure PHI for health care operations purposes. These uses and disclosures are necessary, for example, to evaluate the quality of our laboratory testing, the accuracy of results, accreditation, functions and for AIMS Inc. Operation and management purposes. AIMS Inc. may also disclose PHI to other health care providers or health plans that are involved in your care for their health care operations. For example, AIMS Inc. may provide PHI to manage disease, or to coordinate health care or health benefits.

Patient Signature: _____ Date: _____

Staff Signature: _____ Date: _____





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- **Appointment Reminders and Health-Related Benefits & Services** – AIMS Inc. may use and disclose PHI to contact you as a reminder that you have an appointment with us and may use and disclose PHI to tell you about health-related benefits and services that may be of interest to you. For example, AIMS Inc. may contact you about a new patient service center in your area or about new testing services available at AIMS Inc. based on services ordered by your physician.
- **To Individuals Involved in Your Care or Payment for Your Care** – AIMS Inc. may disclose PHI to a person who is involved in your care or helps pay for your care, such as a family member or friend. We also may notify your family about your location or general condition or disclose such information to an entity assisting in a disaster relief effort. As allowed by federal and state law, we may disclose the PHI of minors to their parents or legal guardians.
- **Business Associates** – AIMS Inc. may disclose PHI to our business associates to perform certain business functions or provide certain business services to AIMS Inc. For example, we may use another company to perform billing services on our behalf. All 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, AIMS Inc. may disclose PHI to their business associates for the purposes of performing certain business functions or health care services on their behalf. For example, we may disclose PHI to business associate of Medicare for the purposes of medical necessity review and audit.
- **Disclosure for Judicial and Administrative Proceedings** – Under certain circumstances, AIMS Inc. may disclose your PHI over the course of a judicial or administrative proceeding, including in response to a court or administrative order, subpoena, discovery request, or other lawful process.
- **Law Enforcement** – AIMS Inc. may disclose PHI for law enforcement purposes, including reporting of certain types of wounds or physical injuries or in response to a court order, warrant, subpoena, or similar process authorized by law. We may disclose PHI when the information is needed: 1) For identification or location of a suspect, fugitive, material witness or missing person; 2) About a victim or a crime; 3) About an individual who has passed away; 4) In relation to criminal conduct on AIMS Inc. premises; or 5) In emergency circumstances to report a crime, the location of the crime or victims, or the identity, description, or location of the person who committed the crime.
- **As Required by Law** – AIMS Inc. must disclose your PHI if required to do so by interventional, federal, state, or local law.
- **Public Health** – AIMS Inc. may disclose PHI for public health activities. These activities generally include: 1) Disclosures to a public health authority to report, prevent or control disease, injury, or disability; 2) Disclosures to report births and deaths, or to report child abuse or neglect; 3) Disclosures to a person subject to the jurisdiction of the Food and Drug Administration (FDA) for the purposes related to the quality, safety, or effectiveness of an FDA-regulated product or activity, including reporting reactions to medications or problems with products or notifying people of recalls of products they may be using; 4) Disclosures to notify a person who may have been exposed to a disease or may be at risk for contracting or spreading a disease or condition; or 5) Disclosures to an employer about an employee to conduct medical surveillance in certain limited circumstances concerning workplace illness or injury.
- **Disclosure About Victims of Abuse, Neglect, or Domestic Violence** – AIMS Inc. may disclose PHI about an individual to a government authority, including social services, if we reasonably believe that an individual is a victim of abuse, neglect, or domestic violence.



- **Health Oversight Activities** – AIMS Inc. may disclose PHI to a health care oversight agency for activities authorized by law such as audits, civil, administrative, or criminal investigations and proceedings/actions, inspections, licensure/disciplinary actions, or other activities necessary for appropriate oversight of the health care system, government benefit-programs, and compliance with regulatory requirements and civil right laws.
- **Coroners, medical Examiners, and Funeral Directors** – AIMS Inc. 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 cause of death, or for performing some other duty authorized by law.
- **Personal Representative** – AIMS Inc. may disclose PHI to your personal representative, as established under applicable law, or to an administrator, executor, or other authorized individual associated with your estate.
- **Correctional Institution** – AIMS Inc. 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.
- **Serious Threat to Health or Safety** – AIMS Inc. may disclose PHI if necessary to prevent or lessen a serious and/or imminent threat to health and safety to a person or the public or for law enforcement authorities to identify or apprehend an individual.
- **Research** – AIMS Inc. may use and disclose PHI for research purposes. Limited data or records may be viewed by researcher(s) to identify patients who may qualify for their research project or for other similar purposes as long as the researcher(s) do not remove or copy any of the PHI. Before we use or disclose PHI for any other research activity, one of the following will happen: 1) A special committee will determine that the research activity poses minimal risk to privacy and that there is an adequate plan to safeguard PHI; 2) If the PHI relates to deceased individuals, the researcher(s) give us assurances that the PHI is necessary for the research and will be used only as part of the research; 3) The researcher(s) will be provided only with information that does not identify you directly.
- **Government Functions** – In certain situations AIMS Inc. 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. Disclosure will be made only in compliance with U.S. Law.
- **Workers' Compensation** – As authorized by applicable laws, AIMS Inc. may use or disclose PHI to comply with workers' compensation or other similar programs established to provide work related injury or illness benefits.
- **De-identifies Information and Limited Data Set** – AIMS Inc. may use and disclose health information that has been "de-identified" by removing certain identifiers making it unlikely that you could be identified. AIMS Inc. 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, limited data set may include your city, county, zip code, but not your name or street address.



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Other Uses and Disclosures of PHI

For purposes not described above, including uses and disclosures of PHI for marketing purposes and disclosures that would constitute a sale of PHI, AIMS Inc. will ask for your written authorization before using or disclosing your PHI. If you signed an authorization form, you may revoke it, in writing, at any time, except the extent that action has been taken in reliance on the authorization.

Information Breach Notification

AIMS Inc. 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 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 establishes the following patient rights with respect to PHI:

- **Right to Receive a Copy of the AIMS Inc. Notice of Privacy Practices** – You have a right to receive a copy of the AIMS Inc. Notice of Privacy Practices at any time by contacting us at 916-332-1210 and asking the AIMS Inc. office manager, or by sending a written request to: Office Manager, AIMS Inc., 5900 Coyle Ave. Suite A, Carmichael, CA 95608.
- **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 operation activities; or 2) Our disclosure of PHI to individuals involved in your care or payment for your care. AIMS Inc. 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 operation purposes and not for treatment, and you have paid for the service in full out of pocket. If we agree to a restriction on any 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.
- **Right to Request Confidential Communication** – You have the right to request that AIMS Inc. communicate with you about your PHI at an alternative means. AIMS Inc. will accommodate reasonable requests.
- **Right to See and Receive Copies of Your PHI** – You and your personal representative have the right to access PHI consisting of your laboratory test results or reports ordered by your physician. Within 30 days after our receipt of your request, you will receive a copy of the completed laboratory report from AIMS Inc. unless an exception applies. Exceptions include our inability to verify the identity of the requesting party, our inability to provide access to the PHI within 30 days, in which case we may extend the response time for an additional 30 days if we provide you with a written statement of the reasons for the delay and the date by which access will be provided. You have the right to access and receive PHI in an electronic format if it is readily producible in such a format. You also have the right to direct AIMS Inc. to transmit a copy to another person you designate, provided such request is in writing, signed by you, and clearly identifies the designated person and where to send the copy of your PHI. To request a copy of your PHI please refer to the following address:





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- **Right to Receive and Accounting Disclosures** – You have the right to receive a list of certain instances in which AIMS Inc. disclose your PHI. The list will not include certain disclosures of PHI, such as (but limited to) those made based on your written authorization or those made prior to the date on which AIMS Inc. was required to comply. If you request an accounting of disclosures of PHI that were made for the purposes of treatment, payment or health care operations, the list will include only those disclosures made in the past three years for which an accounting is required by law, unless your request a shorter period of disclosures.
- **Patient Right to Access Records** – Patients have the right to access their records by sending a written request to:

AIMS Inc., 5900 Coyle Ave. Suite A, Carmichael, CA, 95608

Patients have the right to lodge complaints to the AIMS Compliance Office, Angie Fuher, at 916-332-1210 and to the Office of Civil Rights if their rights have been violated under any applicable law.

You may contact the Office of Civil Rights at:

Website: OCRportal.hhs.gov

Mailing Address: U.S Department of Health and Human Services

200 Independence Avenue, S.W.

Washington, D.C. 20201

Email: ocrcomplaint@hhs.gov

