

## **Notice of Privacy Practices – Obria Medical Clinics**

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

Federal and state law requires that all health care providers protect health records in their possession. If you receive services through *Obria Medical Clinics*, the Health Insurance Portability and Accountability Act of 1996 (HIPAA), protects your health information. In addition, HIPAA requires that you are provided with this Notice of Privacy Rights. This notice lets you know how your health information may be used and disclosed, as well as your rights regarding the health information that is in *Obria Medical Clinics*' possession.

*Obria Medical Clinics* reserves the right to amend this Notice of Privacy Practices at any time in the future, and will make the new provisions effective for all the information that it maintains. Until such amendment is made, *Obria Medical Clinics* is required by law to comply with this notice. Revised notices will be available upon request, in the *Obria Medical Clinics* offices, and on the *Obria Medical Clinics* website.

### **Health Information That Will Be Maintained About You:**

- Your name and (if different) the name and relationship of the person receiving treatment
- Your billing address
- Your telephone number
- Your (or the patient's, if different) condition that brings you to *Obria Medical Clinics*
- The date(s) of your visit(s) to our clinic
- Clinical findings, such as results of blood test(s), pregnancy test(s), limited obstetric ultrasound(s) and any other diagnostic testing or visit(s)

### **Ways in Which Your Protected Health Information May Be Used and Disclosed:**

An example is provided for each category, but these examples are not meant to be exhaustive. Your health information is only used or disclosed as state and federal laws require or permit. In some cases, the law requires that you authorize the disclosure. In other cases, the law allows providers to disclose your health information without your authorization.

**Treatment:** Your health information may be used and disclosed for treatment activities, such as disclosing it to another healthcare provider as it pertains to your treatment.

**Healthcare Operations:** Your health information may be used and disclosed to manage *Obria Medical Clinics*' program operations, such as reviewing the quality of services you receive or as required by the state for reporting purposes.

**Payment:** When billing your insurance, the insurance company from time to time may require additional information regarding the claim submitted, at which time the information requested would be disclosed.

**With Other Professionals Involved in Your Treatment:** Your health information may be disclosed to organizations that are used to assist *Obria Medical Clinics* with providing services to you, such as the laboratory used to process and test various types of specimens, or it may be shared with other professionals who are treating you.

**To Contact You:** Your information in your health records may be used to contact you if there is additional information about treatment or other health-related benefits and services that may be of interest to you.

**In Connection with Your Use of the Obria Mobile App:** If you use the Obria Mobile Application (“Mobile App”) to connect with an Obria healthcare provider or to share information regarding your medical condition or history, your health information submitted to *Obria Medical Clinics* through the Mobile App may be used to verify your identity, to check your qualifications to use the Mobile App, or to follow up with you regarding transactions initiated through the Mobile App. Your information may be used to contact you to inform you of changes to the Mobile App or to send you additional information about *Obria Medical Clinics*. If you allow *Obria Medical Clinics* to track your location through your mobile device, your information may be used to inform you of the nearest medical clinic to you affiliated with *Obria Medical Clinics*. In addition, information submitted to *Obria Medical Clinics* through the Mobile App may be used or disclosed in all the ways described above (e.g., for treatment, healthcare operations, etc.). Your use of the Mobile App is further governed by the terms of the Obria Mobile Application End User License Agreement.

### **Other Ways Your Protected Health Information May Be Used and Disclosed:**

HIPAA specifically permits *Obria Medical Clinics* to use or disclose your health information for other purposes without your consent or authorization. Experiences with such disclosures are rare, and the limited information maintained is generally not applicable.

However, when authorized by law, and to the extent the information is available, HIPAA permits disclosure to:

- Comply with the requirements of federal, state, or local laws, court orders or other lawful process and for administrative or court proceedings
- Report a public health authority for the purpose of preventing or controlling disease, injury, or disability
- Report to the FDA for the quality, safety or effectiveness of FDA-regulated products or activities
- Notify a person who may have been exposed to a communicable disease or may otherwise be at risk of contracting or spreading a disease or condition
- Report abuse, neglect or domestic violence to a government authority

- Provide necessary information to a health oversight agency for activities such as audits, investigations, inspections, licensure of the healthcare system, government benefit programs and regulated entities
- A law enforcement official for specified law enforcement purposes
- Coroners or medical examiners for identification or determining cause of death
- Funeral directors to carry out their duties with respect to the decedent
- Organ procurement organizations for facilitating donation and transplantation
- Researchers conducting studies approved by an Institutional Review Board
- Prevent or lessen a serious and imminent threat to the health or safety of a person or the public
- Authorized federal officials for specialized government functions such as military and veterans activities; national security and intelligence activities; protective services for the president; medical suitability determinations; correctional institutions; government entities providing public benefits and comply with workers' compensation laws

In the following cases, *Obria Medical Clinics* will not use or disclose your health information use you give us written permission: marketing purposes; sale of your information; or most sharing of psychotherapy notes.

### **Uses and Disclosures with Your Authorization**

Other uses and disclosures of your personal information require your written authorization. You may revoke your authorization at any time by doing so in writing.

Although your health record is the physical property of the practitioner or facility that compiled it, the information belongs to you.

### ***You have the right to:***

- Request restrictions on certain uses and disclosures;
- Receive communications of protected health information by alternative means or at alternative locations;
- Inspect, copy and amend your protected health information held at *Obria Medical Clinics* and receive an accounting of certain disclosures (of your protected health information);
- Receive a paper copy of this notice even if you have received it electronically.

### ***In some cases, state law may require that we provide additional protections of certain sensitive information such as:***

- Confidential HIV-related information;
- Alcohol or substance abuse treatment information; and
- Mental health treatment information.

### **Obria's Responsibilities**

*Obria Medical Clinics* is 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 described in this notice, and 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 if writing if you change your mind.

## **HOW CAN YOU REACH US**

If you want additional information about *Obria Medical Clinics*' privacy practices or if you believe that *Obria Medical Clinics* has violated your privacy rights, you may file a complaint by contacting the *Obria Medical Clinics*' *HIPAA Privacy/Compliance Officer* at: 92 Argonaut, #205, Aliso Viejo, CA. 92656. You may mail your request, or bring it to our corporate office. *Obria Medical Clinics* will have 30 days to respond to your request for information that is maintained at *Obria Medical Clinics*. If the information is stored off-site, *Obria Medical Clinics* may take up to 60 days to respond, but you will be informed of the delay.

*Obria Medical Clinics* will not take any action against you or change your treatment in any way if you file a complaint.

*Obria Medical Clinics* will never retaliate against people who file a complaint.