

London Medical Group, LLC
NOTICE OF PRIVACY PRACTICES

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED BY LONDON MEDICAL GROUP, LLC AND HOW YOU CAN OBTAIN ACCESS TO THIS INFORMATION. PLEASE REVIEW THIS DOCUMENT CAREFULLY.

London Medical Group, LLC (“LMG”) is required by law to maintain the privacy of your Protected Health Information (“PHI”). LMG is further required to provide you with notice of LMG’s legal duties and privacy practices with respect to PHI. PHI includes all individually identifiable health information concerning you which is either maintained by LMG or transmitted by LMG to others, whether in oral, written or electronic form.

Please be assured that LMG considers the maintenance of your privacy to be integral to its mission, and that LMG has taken steps to guard against any improper use or disclosure of your PHI.

The uses and disclosures of PHI are generally regulated by a federal law called the Health Insurance Portability and Accountability Act of 1996 (referred to as “HIPAA”) and the regulations which were promulgated to enforce HIPAA. In instances where state laws relating to the privacy of PHI differ from HIPAA, and a state law is either more protective of your PHI or provides you with greater access to your PHI, the state law overrides HIPAA.

Part I: Uses and Disclosures of PHI

1. Carrying Out Treatment, Payment and Health Care Operations

Except in an emergency or other special circumstance, before LMG provides treatment to you, we will ask you to read and sign a written form acknowledging receipt of this Notice of Privacy Practices and consenting to LMG’s use and disclosure of your PHI for purposes of facilitating your “treatment” by other health care providers, helping LMG to obtain “payment” for services we provide to you, and for LMG’s “health care operations” (e.g., internal administration, quality improvement, and customer service), as detailed below. The consent will also specifically authorize LMG to disclose your PHI to Comprehensive Health Care, LLC, a company LMG works with, to help carry out LMG administrative and related functions.

“Treatment” is the providing, coordinating or managing of your health care and related services. It includes consultations and referrals between one or more of your health care providers, such as doctors, nurses, therapists and technicians. Uses and disclosures of PHI for treatment purposes might include disclosures within LMG or between LMG and other providers. For example, a LMG physician may refer you for care to another provider, including a specialist, in order to better assure continuity of care. LMG may also use your PHI to contact you to provide you with information about treatment alternatives or other health related benefits and services that may be of interest to you.

“Payment” includes billing, collection and related services relating to seeking and obtaining payment from third parties (e.g., commercial insurance carriers and government payers like Medicare), and may involve communications relating to such activities as coverage determinations, claims processing, subrogation, reviews for medical necessity or appropriateness of care, and utilization review. Uses and disclosures of PHI for payment purposes may include communications with other health care providers if PHI is needed by the other providers to enable them to obtain payment for medical services provided to you.

“Health care operations” include quality assessment and quality improvement activities, licensure and credentialing activities, and training of health care and non-health care professionals.

2. Other Uses and Disclosures of PHI

LMG may also use or disclose your PHI in the following circumstances:

(1) Disclosures to Relatives and Close Friends Involved in Your Care. LMG may disclose PHI to a family member or friend involved with your care or with handling your bills if (a) you are present (or reasonably available to us) prior to the disclosure and you agree to the disclosure, or (b) we have provided you with an opportunity to object to the disclosure and you did not object, or (c) we may reasonably infer that you do not object to the disclosure (e.g., if family or friends are present while treatment is being provided and they are participating in discussions regarding treatment). If you are not present or available, and the opportunity for you to agree or object to a use or disclosure cannot practically be provided, LMG may exercise professional judgment to determine whether a disclosure would be in your best interests. If information is disclosed to a family member or close friend, only that information which is relevant to that person’s involvement with your treatment will be disclosed.

(2) Public Health Activities. LMG may disclose PHI for the following public health activities and purposes: (a) to report health information to appropriate public health authorities for the purpose of preventing or controlling disease, injury or disability; (b) to report child abuse and neglect to public health authorities or other government authorities authorized by law to receive such reports; (c) to report information about products under the jurisdiction of the U.S. Food and Drug Administration for quality, safety or effectiveness purposes; (d) to alert 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; and (e) to report information to your employer as required under laws addressing work-related illnesses and injuries or workplace medical surveillance.

(3) Victims of Abuse, Neglect or Domestic Violence. LMG may disclose PHI to a government authority, including a social service or protective services agency authorized by law to receive such reports, if we reasonably believe you are a victim of abuse, neglect or domestic violence.

(4) Health Oversight Activities. LMG may disclose PHI to a health oversight agency that oversees the health care system and ensures compliance with the rules of government health programs such as Medicare or Medicaid.

(5) Judicial and Administrative Proceedings. LMG may disclose PHI in the course of a judicial or administrative proceeding in response to a legal order or other lawful process.

(6) Law Enforcement Officials. LMG may disclose PHI to the police or other law enforcement officials as required by law or in compliance with a court order.

(7) Decedents. LMG may disclose PHI to a coroner or medical examiner as necessary to identify the deceased, determine the cause of death, or as otherwise authorized by law. LMG may also disclose PHI to a funeral director as necessary to carry out the funeral director's duties, including arrangements after death.

(8) Organ and Tissue Procurement. LMG may, in a manner consistent with State law, disclose PHI to organizations that facilitate organ, eye or tissue procurement, banking or transplantation.

(9) Research. LMG may disclose PHI without your consent or authorization for research if an Institutional Review Board approves a waiver of authorization for disclosure and authorization is not required by law.

(10) Health or Safety. LMG may use or disclose PHI to prevent or lessen a serious and imminent threat to a person's or the public's health or safety.

(11) Specialized Government Functions. LMG may disclose PHI to units of the government with special functions, such as the U.S. military or the U.S. Department of State under certain circumstances.

(12) Workers' Compensation. LMG may disclose PHI as authorized by and to the extent necessary to comply with laws relating to workers' compensation or other similar programs.

(14) Required by Law. LMG may disclose PHI when required by federal, state or local laws.

3. Uses and Disclosures of PHI that Require Your Written Authorization

Except as described in this Notice or specifically required or permitted by law, LMG will not use or disclose your PHI without your specific written, signed authorization. Even if you have signed an authorization, the authorization may be revoked by you, in writing, at any time, and once the authorization is revoked, LMG may no longer use or disclose PHI for the purpose described in the authorization (unless, and to the extent that, LMG has already taken action based upon the authorization).

Part 2. Your Individual Rights

a. Right to Request Restrictions on Uses and Disclosures of PHI

If you wish, you may request that LMG restrict its uses and disclosures of your PHI for the carrying out of treatment, payment or health care operations, or you may request that LMG restrict uses and disclosures of your PHI to family members, relatives, friends or other persons identified by you who are involved in your care or the payment for your care. You or your personal representative will be required to complete a form to request restrictions on uses and disclosures of your PHI. Please note, however, that LMG is not required to agree to your request.

b. Right to Request Alternate Method of Communication

You have the right to reasonably request that LMG communicate with you in specific ways or at specific locations, including in order to better ensure your privacy. Requests to receive communications by specific or alternative means or at specific or alternative locations should be made to the LMG Privacy Officer at P.O. Box 187, Dover, MA 02030, (781) 559-0540

c. Right to Inspect and Copy PHI

You also have a right to inspect and obtain a copy of your PHI to the extent that it is contained in a “designated record set.” A “designated record set” includes: medical records and billing records, and other information used by or for LMG to make decisions about your treatment. If you want access to your PHI, you will be required to complete a form and to submit the form to the LMG Privacy Officer at LMG, P.O. Box 187, Dover, MA 02030, (781) 559-0540. Under some circumstances, LMG may deny a request to inspect or obtain a copy of some information in a record. If access is denied, you will be provided with a written denial setting forth the basis for the denial and a description of how you may exercise review rights with respect to the denial.

d. Right to Amend PHI

You have the right to request that LMG amend your PHI or a record about you. If you desire such an amendment, you will be required to complete a request form, including a statement explaining the reason for the requested amendment, and to submit the request to the LMG Privacy Officer at LMG, P.O. Box 187, Dover, MA 02030, (781) 559-0540. If the request is denied in whole or part, LMG will provide you with a written denial that explains the basis for the denial. You may then submit a written statement disagreeing with the denial and have that statement included with any future disclosure of your PHI. LMG may include a rebuttal statement with your PHI addressing your statement of disagreement.

e. The Right to Receive an Accounting of PHI Disclosures

At your request, LMG will also provide you with an accounting of disclosures of your PHI by LMG during the period covered by your request (which may be a period of up to six years prior to the date of your request). This accounting will not include PHI disclosures made: pursuant to your authorization; to you about your own PHI; to carry out treatment, payment or health care operations; incident to a use or disclosure which was otherwise permitted or required by law; for national security or intelligence purposes; to correctional or law enforcement officials; or prior to April 14, 2003. If you request more than one accounting within a 12-month period, LMG will charge a reasonable, cost-based fee for each subsequent accounting.

f. The Right to Receive a Paper Copy of This Notice Upon Request

To obtain a paper copy of this Notice of Privacy Practices, you may print it from LMG’s website or contact the following individual: the LMG Privacy Officer at LMG, P.O. Box 187, Dover, MA 02030, (781) 559-0540.

g. The Right to Receive Further Information or to Complain.

If you would like to receive further information about your privacy rights, are concerned that LMG may have violated your privacy rights, or disagree with a decision that LMG has made about access to your PHI, you may contact the LMG Privacy Officer at LMG, P.O. Box 187, Dover, MA 02030, (781) 559-0540. You may also file a written complaint with the Director, Office of Civil Rights, U.S. Department of Health and Human Services. Upon request, LMG will provide you with the correct

address for the Director. LMG will not retaliate against you if you file a complaint with us or with the Director.

Part 3. Effective Date and Duration of this Notice of Privacy Practices

a. Effective Date.

This Notice of Privacy Practices is effective on April 14, 2003.

b. Right to Change Terms of this Notice.

LMG may change the terms of this Notice of Privacy Practices at any time. If LMG changes the terms of this Notice, we will make the new Notice terms effective for all PHI that we maintain, including any information created or received prior to issuing the new Notice. If LMG changes this Notice of Privacy Practices, we will post the new Notice in our office waiting room. The new Notice may also be obtained by contacting the LMG Privacy Officer.

Part 4. Location of LMG Privacy Office.

You may contact the LMG Privacy Office at:

Privacy Office
London Medical Group
P.O. Box 187
Dover, MA 02030, (781) 559-0540