



QuadMED™
your wellness-lifestyle connection

QuadMed Privacy Practices

Medical and Dental Clinics, Pharmacy
and Rehabilitation Services, EAP, AODA

November 2011 Edition

Notice of QuadMed Privacy Practices

QuadMed Medical Clinics, Dental Clinics, Pharmacy, and Rehabilitation Services, EAP, AODA

This Notice Describes How Medical Information About You May Be Used And Disclosed And How You Can Get Access To This Information. Please Read It Carefully.

Effective Date: November 7, 2011

Purpose: The Health Insurance Portability and Accountability Act ("HIPAA") and other privacy related regulations (referred to in this Notice as the "Privacy Rule") requires QuadMed to inform its patients about the ways that QuadMed may use and disclose your protected health information. In addition, the Privacy Rule requires QuadMed to inform patients of your rights regarding disclosures of your health information.

It is the policy of QuadMed to keep medical information confidential and not disclose patient protected health information without your consent, authorization or as specifically permitted or required by federal or state law as described in this Notice. We are required to provide you with a copy of this Notice and to abide by the terms of this Notice as currently in effect. The Privacy Rule also requires QuadMed to make a good faith effort to obtain written acknowledgement of your receipt of this Notice.

State laws and certain federal laws may be more protective of certain information than the federal Privacy Rule. For instance, many states restrict the use or disclosure of your information relating to treatment for mental health, development disabilities, alcoholism, drug dependence or information concerning HIV status, without obtaining your authorization. Certain federal laws may also restrict the use or disclosure of such information. Some states also have specific procedures for responding to discovery requests or subpoenas or for disclosing information to coroners or funeral directors. QuadMed will not use your information in any way that is not permitted by state law or other more restrictive federal laws.

Any questions about this Notice, QuadMed's privacy practices or questions you may have regarding possible violations of your privacy may be directed to QuadMed's Privacy Officer. To facilitate complaints, QuadMed requests that you use our complaint form available at the QuadMed reception desks. This form will be sent to the

QuadMed Privacy Officer who will address any concerns. No patient will be retaliated against for filing a complaint.

All forms referred to in this document are available to you through QuadMed Reception and through the QuadMed Privacy Officer.

The QuadMed Privacy Officer can be reached at:

QuadMed

Attn: Privacy Officer
W227 N6103 Sussex Road
Sussex, WI 53089
414.566.6400

In addition to filing a complaint at QuadMed, any patient may also contact the federal government directly, specifically the Office of Civil Rights at the Department of Health and Human Services at the appropriate Regional Office as listed at <http://www.hhs.gov/ocr/office/about/rgn-hqaddresses.html> or at the contact information below:

Office of Civil Rights

U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Room 509 F, HHH Building
Washington, D.C. 20201
202.619.0257
Toll Free: 1.877.696.6775
Email: OCRcomplaint@hhs.gov

USES AND DISCLOSURES OF YOUR PROTECTED HEALTH INFORMATION FOR TREATMENT, PAYMENT OR HEALTH CARE OPERATIONS

QuadMed may use and disclose protected health care information without your consent or authorization for treatment, payment and health care operations. When used for payment or health care operations purposes, QuadMed will limit the information used or disclosed to that which is minimally necessary to accomplish the purpose of the use or disclosure.

1. **Treatment:** QuadMed may use or disclose your protected health information to treat you, to facilitate the appropriate transfer of information to consulting specialists or other referral centers (e.g., the hospital or surgical centers), and to ensure continuity of care and coordinate your health care through case management. For example, QuadMed doctors may disclose your information to each other if they are

consulting each other in order to best manage your care at QuadMed.

2. **Payment:** QuadMed may use and disclose your health information to send bills and to collect payment from you, your insurance company and other third-parties for services you have received at QuadMed. For example, QuadMed may disclose your health information about dates of service and type of service/procedures performed to your health insurance company in order to receive reimbursement for the services you received.
3. **Health Care Operations:** In order to ensure quality care for our patients, QuadMed may use or disclose your health information for health care operations. These uses and disclosures are necessary to provide quality care to all patients and to facilitate the functioning of QuadMed clinics. For example, QuadMed may use information from your medical record to help evaluate its treatment and services provided, and to develop guidelines related to treatment, for chronic health problems like back pain, depression, asthma or hyperlipidemia.
3. **Organ and Tissue Donation:** QuadMed may disclose protected health information to organ procurement organizations or organ donation banks to facilitate organ and tissue donation and transplantation.
4. **Research:** QuadMed sometimes participates in research studies for new treatments. QuadMed may share your protected health information for research purposes if it obtains your authorization and/or fulfills other legally required privacy requirements.
5. **Circumstances of Serious and Imminent Threat to Health or Safety:** If there is a serious and imminent threat to your health or safety or the health or safety of the public or another person, QuadMed may disclose your protected health information to persons able to prevent the threat.
6. **Victims of Abuse, Neglect or Domestic Violence:** In certain circumstances, QuadMed may disclose health information if QuadMed reasonably believes a patient has been the victim of abuse, neglect or domestic violence.
7. **Coroners, Medical Examiners and Funeral Directors:** QuadMed may disclose information to a coroner, medical examiner or funeral director to identify a deceased person or to assist with determining the cause of a death.
8. **Health Oversight Activities:** QuadMed may disclose protected health information to certain health oversight agencies for activities authorized by law, such as audits, investigations, accreditations, licensure or disciplinary activities.
9. **Worker's Compensation:** QuadMed may disclose your medical records to the state worker's compensation program to the extent authorized by state or federal laws. For example, if you injure your back at work, QuadMed may release recommendations on your diagnosis, treatment, work modification/time off and expected length of illness to your employer's worker's compensation department or representative.
10. **Specialized Government Functions:** QuadMed can disclose your protected health information for specific government activities, including the following:
 - *Inmates and Law Enforcement Custody:* If you are an inmate of a correctional institution or under the custody of a law enforcement official, QuadMed may disclose medical information to

USES AND DISCLOSURES OF YOUR PROTECTED HEALTH INFORMATION PERMITTED WITHOUT YOUR AUTHORIZATION

Without your written authorization, QuadMed may use or disclose your health information for the following purposes to the extent not otherwise restricted by state law or other more restrictive federal laws:

1. **As Required By Law:** QuadMed is permitted to disclose your protected health information when required to do so by state, federal or local law.
2. **Public Health Policy:** QuadMed is permitted to disclose your health information for public health activities such as:
 - to prevent or control disease, injury or disability, to report deaths, and for public health surveillance or interventions;
 - to report child abuse or neglect;
 - to the FDA, to report adverse events or product defects, to track products, to enable product recalls, or to conduct post-market surveillances as required by the FDA; or
 - 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.

the correctional institution or law enforcement official as necessary: **1)** for the institution to provide you with health care; **2)** to protect your health and safety or the health and safety of others; or **3)** for the safety and security of the correctional institution.

- *Medical Suitability Determinations:* QuadMed may disclose your protected health information to the Department of State for use in making medical suitability determinations.
- *Military and Veterans:* If you are a member of the armed forces, QuadMed may disclose your protected health information as required by military command authorities for the proper execution of military missions.
- *National Security and Intelligence:* QuadMed may disclose your protected health information to authorized federal officials for intelligence, counter-terrorism and national security activities.
- *Protective Services for the President and Others:* QuadMed may disclose your protected health information to those federal officials providing protection to the President, other authorized persons, or foreign heads of state or to conduct special investigations.

11. Judicial and Administrative Proceedings:

QuadMed may release protected health information in response to a court or administrative order, a subpoena, a discovery request or other lawful process.

- 12. Law Enforcement:** QuadMed may disclose your protected health information to law enforcement officials as required by law or as directed by a court order or other lawful process, and in other limited circumstances.

DISCLOSURES THAT YOU MAY OBJECT TO

Unless you otherwise object, QuadMed may also use or disclose your medical information in the following situations:

1. QuadMed may contact you to provide appointment reminders or information about treatment alternatives or other health related benefits and services that may be of interest to you.
2. QuadMed currently does not use your health information for fundraising purposes. If QuadMed chose to use your information for fundraising, QuadMed would get your approval for this disclosure prior to any release of information.

3. QuadMed currently does not use your information for external marketing purposes and will not use any health information for marketing unless you have given specific authorization for this disclosure.
4. QuadMed may release medical information to a family member or friend who is involved in your medical care or who helps pay for your care. In addition, QuadMed may disclose medical information about you to assist with disaster relief efforts or to notify a family member or friend of your medical condition and that you are in a QuadMed clinic.
5. QuadMed may disclose the following information regarding your presence in a QuadMed clinic: your name, location of the facility and general condition.

USES AND DISCLOSURES OF YOUR HEALTH INFORMATION REQUIRING AUTHORIZATION

Any other uses or disclosures of your health information not addressed in this Notice will be made only with your written authorization. You may revoke an authorization in writing at any time except to the extent QuadMed relied on it in making an authorized use or disclosure. QuadMed requests that you use our Authorization for Release of Medical Information and our Revocation of Authorization to Release Medical Information form for this purpose.

PATIENT RIGHTS REGARDING PROTECTED HEALTH INFORMATION

As a patient, you have numerous rights regarding how your protected health information is used. Your rights include the following:

1. You have a right to request that we restrict or limit our uses and disclosures of protected health information. To make a request for a restriction or limitation, we will provide you with a form to fill out. We are required to comply with your request that we restrict disclosures to a health plan for purposes of payment or health care operations if you paid in-full, out-of-pocket, for the health care item or service. We will attempt to accommodate other reasonable requests but it is important to understand that QuadMed is not required to agree to requests for restrictions.
2. You have a right to receive communications that contain protected health information at alternative locations or by alternative means. For example, patients may request that QuadMed contact them at work for appointment reminders rather than at home provided that the patient

- provides QuadMed with his or her work contact number. However, QuadMed will not honor a request for alternative contact methods unless the patient provides sufficient alternative address or contact information.
3. You have the right to inspect and copy your protected health information, not including psychotherapy notes. QuadMed requests that you use the Authorization for Release of Medical Information form when exercising this right. You may request an electronic copy of information about you maintained in our electronic medical record. To the extent permitted by law, QuadMed may charge a reasonable fee for the costs of copying, mailing or preparing summary information that responds to your request. You should know that in certain limited circumstances, the law allows QuadMed to deny your request to inspect and copy your records. If you are denied access to your health information, you may request that the denial be reviewed.
 4. You have the right to have changes made to your protected health information if you feel it is inaccurate or incomplete. QuadMed requests that you use our Request for Amendment of Health Information form to request these changes. QuadMed will review your request and make the changes if we believe they are appropriate. QuadMed will also distribute these changes to health care providers that you ask be made aware of the change or to others we believe should know of the change. Under some circumstances, QuadMed may deny your request for an amendment to your protected health information. QuadMed will provide a written response to your request for an amendment and in this response will provide detailed information on how you may review the changes or appeal the denial.
 5. You have a right to receive an accounting of certain disclosures of your protected health information made by QuadMed. QuadMed requests that you use the Request for Accounting of Protected Health Information form to receive this log. Your request must specify a time period for the accounting, which may be no longer than six years. QuadMed will provide the first accounting to you in any 12-month period free-of-charge. After this, QuadMed may charge a fee but we will notify you of the fee before we process the request. You have the right to withdraw your request once you have learned that your request will require you to pay a fee.
 6. You have a right to receive a paper copy of this Privacy Notice at any time. If you have received an electronic version of this Privacy Notice, you may also request a paper copy. Paper copies are available through QuadMed reception, from the QuadMed Privacy Officer, or on QuadMed's website, www.quadmedical.com.

DISTRIBUTION AND REVISION OF THE PRIVACY NOTICE

QuadMed will distribute this Notice to all patients who will be seen on or after the effective date of November 7, 2011. QuadMed will post the Notice in a clear and prominent location in all of its clinics and on its web site, www.quadmedical.com.

QuadMed reserves the right to make revisions to the Privacy Notice. QuadMed will promptly update and post the revised Notice at its clinic facilities whenever a substantial change is made to any of our privacy practices. QuadMed will also post any revised Notice on its web site and make the revised Notice available to you at your request.