



Notice of Privacy Practices

Effective Date: December 11, 2003

This notice describes how health information about you may be used and disclosed and how you can get access to this information. Please read it carefully.

“Protected Health Information” is information that identifies you and relates to your past, present or future physical or mental health or condition; the provision of health care to you; or the past, present, or future payment for health care furnished to you. In this notice, we call Protected Health Information “health information.” If you have any questions about this notice, please call us at 763-862-3971.

Our pledge regarding health information

We understand that health information about you is personal. We are committed to protecting the privacy of your health information by following all applicable federal and state privacy and confidentiality requirements. As a result, we have developed policies, improved the controls over our computers and other systems which access and store health data, and educated our employees about protecting your health information. We are required by law to keep your health information private and to give you this notice of our legal duties and privacy practices. When required by Minnesota, federal or any other law, we will get your consent before using or disclosing your health information.

AccuKare, Inc. obtains health information about and from our clients. When we get this information, we make a record of the care and services you receive from AccuKare, Inc. We need this record to give you quality care and to comply with certain legal requirements. This notice tells you how we use and disclose health information about you. It also describes the rights you have to access your information, certain obligations we have regarding the use and disclosure of your health information and how we make sure it is kept private.

This notice applies to all of the records of your care provided by AccuKare, Inc., created by us, your physician(s), other health care providers or an employee of a company we have contracted with to help us provide services. All of our employees will follow this notice.

Protecting the security of your health information

AccuKare, Inc. works hard to protect the privacy and security of your health information while you are cared for and after your care has ended. AccuKare, Inc. uses electronic record systems and believes that they are an important part of improving the quality and safety of the care we give. Authorized members of our workforce use these systems so that they have the information needed to care for you. AccuKare, Inc. has policies, processes and technical protections in place to keep your information from being seen by anyone who should not see it.

While our internal information systems are secure from access by unauthorized people, e-mail communication between you and AccuKare, Inc. is not secure because it is sent through public communication lines (the internet). There is a possibility that e-mail sent using the Internet could be received by an unauthorized person. Nurses and staff will not communicate with you using e-mail unless you want us to do so.

How we may use and disclose health information about you:

The following sections list different ways that we use and disclose health information. Not every use or disclosure will be listed; however, all the ways we use and disclose information will fall into one of the categories.

For treatment. We use health information about you to provide your health care. We may disclose health information about you to physicians, nurses, technicians, medical students, PCA's or other staff who are involved in taking care of you.

For payment. We used and disclosed health information about you so that we can bill you, the responsible party (guarantor), Medicare or other governmental programs, insurance companies or a third party for the services provided. We may tell your health plan about a treatment you are going to have to determine whether your plan will pay for the treatment.

For health care operations. We may use and disclose health information about you for health care operations. These uses and disclosures are necessary to run our facility and make sure that all of our clients get quality care. For example, we may use health information to review our services and the staff caring for you. Sometimes we need to hire other companies such as consultants and accountants to help us with some health care operations. If we do, we only provide them with health information when it is needed and only after they have signed an agreement to follow our Notice of Privacy Practices and the law.

Health-related benefits and services. We may use and disclosed health information to tell you about health-related benefits or services that you may be interested.

Individuals involved in your care or payment for your care. When you allow us to, we may release health information about you to a family member or friend who is involved in your health care while you are a client of AccuKare, Inc. We may also give a limited amount of information to someone who helps pay for your care so they can help with the payment of a claim. In the event of a natural disaster or other disaster, we may disclose health information about you to an entity helping with a disaster relief effort so that your family can be notified about your condition and location.

As required by law. We will disclose health information about you when required to do so by federal, state or local law.

Special situations

To avert a serious threat to health or safety. We may use and disclosed health 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 would only be to someone able to help prevent the threat.

Workers Compensation. If you are being treated for a work-related injury or condition, we may release health information about you for workers' compensation or similar programs. These programs provide benefits for work-related injuries or illness.

Public health risks. We may disclose health information about you to public health authorities for certain public health activities. These include:

- to prevent or control disease, injury or disability;
- to report child abuse or neglect;
- to report reactions to medications or problems with products;
- to notify people of recalls or products they may be using;
- to notify a person who may have been exposed to a disease or may be at risk for getting or spreading a disease or condition;
- to notify the appropriate government authority if we believe a client has been the victim of abuse, neglect or domestic violence.

Health oversight activities. We may disclose health information to a health oversight agency for activities authorized by law. Examples of oversight activities include audits, investigations, inspections and licensing. These activities are necessary for the government to monitor the health care system, government programs and compliance with civil rights laws.

Lawsuits and disputes. If you are involved in a lawsuit or a dispute, we may disclose health information about you if we get a court or administrative order. WE may also disclose health information about you in response to a subpoena, discovery request or other lawful process by someone else involved in the dispute, but generally only if your consent is obtained.

Law enforcement. We may release health information if asked to do so by a law enforcement official:

- in response to a court order, grand jury subpoena, warrant, summons or similar process;
- to identify a deceased person, or locate a missing child under age 18;
- about the victim of a crime if, under certain limited circumstances, we are unable to obtain the person's agreement.

We may also disclose the health information to a law enforcement official:

- about a death we believe may be the result of criminal conduct;
- about criminal conduct in a client home;
- 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;
- in other situations as required by law.

National security and intelligence activities. We may release health information about you to authorized federal officials for activities authorized by law. We may disclose health information about you to authorized federal officials so they may provided protection to the President, other authorized persons or foreign heads of state or conduct special investigations.

Your rights regarding health information about you

You have the following rights regarding health information we maintain about you.

Right to inspect and copy. You have the right to inspect and copy your health information. You must submit your request in writing to the address on the bottom of this privacy notice. We may deny your request to inspect and copy in certain very limited circumstances. If you are denied access to health information, you may request that the denial be reviewed. Another licensed health care professional chosen by us will review your request and the denial. The person conducting the review will not be the person who denied your request. We will comply with the decision of the reviewer.

Right to amend. If you feel that health information we have about you is incorrect or incomplete, you may ask us to amend the information. You have the right to request an amendment for as long as the information is kept by or for us. To request an amendment, submit a written request to the address on the bottom of this privacy notice. You must provide a reason that supports your request. We may deny your request for an amendment if it is not in writing or does not include a reason to support the request. In addition, we may deny your request if you ask us to amend information that:

- was not created by us, unless the person or entity that created the information is no longer available to make the amendment;
- is not part of the health information kept by or for us;
- is not part of the information which you would be permitted to inspect and copy;
- is accurate and complete.

We will notify you in writing if we deny your request. If the request is denied, you have the right to submit a written statement disagreeing with the denial, which will be added or linked to the health information in question.

Right to an accounting of disclosures. You have the right to request a list of the disclosures of your health information, if any, we have made without our written authorization to third parties for purposes other than for treatment, payment, health care operations and certain other limited purposes. To request this list, you must

