

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 AND REPORT ANY GRIEVANCE TO THE CMT PRIVACY OFFICIAL.

The Health Insurance Portability & Accountability Act of 1996 (HIPAA) is a federal program that requires that all medical records and other individually identifiable health information used or disclosed by us in any form, whether electronically, on paper, or orally, are kept properly confidential. This Act gives you, the Patient, significant new rights to understand and control how your health information is used. HIPAA provides penalties for covered entities that misuse personal health information.

We have prepared this "Summary Notice of HIPAA Privacy Practices" to explain how we are required to maintain the privacy of your health information and how we may use and disclose your health information. A Notice of HIPAA Privacy Practices containing a more complete description of the uses and disclosures of your health information is available to you upon request.

We may use and disclose your medical records for each of the following purposes: treatment, payment, and health care operations: TREATMENT means providing, coordinating, or managing health care and related services by one or more health care providers

PAYMENT means such activities as obtaining reimbursement for services, billing or collection activities and utilization review. HEALTH CARE OPERATIONS include the business aspects of running our laboratory services practice, such as conducting quality assessment and improvement activities, auditing functions, cost-management analysis and customer service. Any other uses and disclosures will be made only with your written authorization. You may revoke such authorization in writing and we are required to honor and abide by that written request, except to the extent that we have already taken actions relying on your authorization. You have the following rights with respect to your protected health information, which you can exercise by presenting a written request to the CMT Privacy Officer: PO Box 4695, Bay St. Louis, MS 39521. CMT may also create and distribute de-identified health information by removing all references to individually identifiable information.

1. You have the right to ask for restrictions on the ways we use and disclose your health information for treatment, payment and health care operations. You may also request that we limit our disclosures to persons assisting your care. We will consider your request, but are not required to accept it.
2. You have the right to request that you receive communications containing your protected health information from us by alternative means or at alternative locations. For example, you may ask that we only contact you at home or by mail.
3. Except under certain circumstances, you have the right to inspect and copy medical, billing and other records used to make decisions about you. If you ask for copies of this information, we may charge you a nominal fee for copying and mailing.
4. If you believe that information in your records is incorrect or incomplete, you have the right to ask us to correct the existing information or add missing information. Under certain circumstances, we may deny your request, such as when the information is accurate and complete.
5. You have a right to receive a list of certain instances when we have used or disclosed your medical information. We are not required to include in the list uses and disclosures for your treatment before April 14, 2003 among others. If you ask for this information from us more than once every twelve months, CMT may charge you a fee to send you your request or have you come in for a copy with proper photo ID.
15. CMT requires a photo ID if records are to be issued in person at the clinic, and will not release reports to anyone but the client or the assigned person that the client has identified in writing.

## CMT PRIVACY POLICY

CMTs general position on implementation or compliance with HIPAA and other privacy laws:

- A. Protect and enhance consumer's rights of access to information.
- B. Improve healthcare quality by restoring trust in the system by providing test reports by certified labs.
- C. Improve efficiency of delivery within the national framework.
- D. Will not use or disclose an individuals protected health information (PHI) except as otherwise permitted and/or required by HIPAA.
- E. PHI may be used only for treatment, payment, or healthcare operations. All other uses and disclosures will be by authorization only and Patient may revoke authorization.
- F. All CMT Clients will receive a copy of and acknowledge the Privacy Notice. It is also available for the asking by mail or email, and posted in a clear and prominent place in the CMT office(s).
- G. Privacy Notice will describe how medical information about Patients may be used and disclosed and how they may access said information.
- H. CMT will make reasonable efforts to limit disclosure of PHI as much as possible.
- I. Continuing compliance with HIPAA will be achieved through ongoing assessment, oversight and informational training, as coordinated through the privacy officer.
- J. CMT shall address all complaints received from patients, clients, employees or third parties in an expeditious and meaningful manner.
- K. CMT respects the rights of individuals, including employees, to make complaints, ask questions or inquire as to CMT's compliance with HIPAA and other privacy and state laws.
- L. No adverse action or retaliation shall be taken against any such individual or employee based on any legitimate complaint, question, or inquiry.
- M. CMT must identify those members of its workforce that require access to protected health information to perform their duties, specify the protected health information to which they require access and make reasonable efforts to limit their access accordingly.
- N. All employees will be trained in order that CMT will be HIPAA compliant. New employees will be trained on a regular basis to ensure continued compliance with new personnel. Personnel will be retrained if significant changes occur which affect HIPAA or privacy laws. Employees, who fail to follow HIPAA requirements and/or the policies of CMT with respect to privacy rules, shall be sanctioned appropriately. Such sanctions may range from oral reprimand to termination. Any intentional breach of patient confidentiality, not permitted by law, shall be severely punished. All such sanctions shall be documented, in writing, by CMT.
- O. To the extent practicable, CMT will mitigate the harmful effects of any known use or disclosure, by itself or its business associates that is in violation of the privacy rule and/or policies and procedures.
- P. Continue to update and educate our staff for the benefit of our clients and make all attempt to maintain client privacy and confidentiality at all times.