

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.

[Life Transitions] (the "Practice") is committed to protecting your privacy. The Practice is required by federal law to maintain the privacy of Protected Health Information ("PHI"), which is information that identifies or could be used to identify you. The Practice is required to provide you with this Notice of Privacy Practices (this "Notice"), which explains the Practice's legal duties and privacy practices and your rights regarding PHI that we collect and maintain.

YOUR RIGHTS

Your rights regarding PHI are explained below. To exercise these rights, please submit a written request to the Practice at the address noted below.

To inspect and copy PHI.

- You can ask for an electronic or paper copy of PHI that is maintained in a "designated record set", as defined by HIPAA. The Practice may charge you a reasonable fee for providing a copy of PHI.
- The Practice may deny your request if it believes in the professional judgement of the Provider that the disclosure will endanger or cause harm to you or another person. Depending on the reason for the denial of your request, you may have a right to have this decision reviewed.

To amend PHI.

- You can ask to correct PHI you believe is incorrect or incomplete. Such a request to amend your PHI must be requested in writing and provide a reason for the request.
- The Practice may deny your request. If the Practice denies your request to amend your PHI, you have a right to file a statement of disagreement with the Practice. The Practice may also prepare and provide you a rebuttal to your statement.

To request confidential communications.

- You can ask the Practice to communicate with you about health matters in a certain way or at a certain location. The Practice will accommodate reasonable requests. We may require information regarding how payment will be handled or specification of an alternative address or other method of contact as a condition for accommodating your request. We will not ask you for an explanation of why you are making the request.

To limit what is used or shared.

- You can ask the Practice not to use or share PHI for treatment, payment, or business operations. The Practice is not required to agree to your request unless the request is to restrict disclosure of PHI to a health plan for purposes of carrying out payment for health care operations, and the PHI pertains to health care items or services that you paid for out of pocket. In that case, we are required to honor your request for a restriction.

To obtain an accounting of disclosures list of those with whom your PHI has been shared.

- You can ask for a list, called an accounting, of the times your health information has been shared. You can receive one accounting every 12 months at no charge, but you may be charged a reasonable fee if you ask for more than one accounting in any 12-month period.

Breach Notification

If there is a breach of unsecured PHI concerning you, the Practice may be required to notify you of this breach, including what happened and what you can do to protect yourself.

To receive a copy of this Notice.

- You have a right to a copy of this notice even if you agreed to receive the Notice electronically.

To choose someone to act for you.

- If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights.

To file a complaint if you feel your rights are violated.

- You can file a complaint by contacting the Practice using the following information:

Life Transitions

17937 Hall Road Macomb, Michigan 48044

Anna Hickey

586-255-0499

- You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting www.hhs.gov/ocr/privacy/hipaa/complaints/.
- The Practice will not retaliate against you for filing a complaint.

To opt out of receiving fundraising communications.

- The Practice may contact you for fundraising efforts, but you can ask not to be contacted again.

OUR USES AND DISCLOSURES

1. Routine Uses and Disclosures of PHI

The Practice is permitted under federal law to use and disclose PHI, without your written authorization, for certain routine uses and disclosures, such as those made for treatment, payment, and the operation of our business. The Practice typically uses or shares your health information in the following ways:

To treat you.

The Practice can use and share PHI with other professionals and those involved in your

care for the purposes of providing coordination or managing your health care treatment and related services. This includes consultation with clinical supervisors or other treatment team members.

- Example: Your primary care doctor asks about your mental health treatment.

To run the health care operations.

- The Practice can use and share PHI to run the business, improve your care, such as quality assessment activities, therapist or staff review activities, licensing, and conducting or arranging for other business activities.
- Example: The Practice uses PHI to review services provided by Practice's therapists.

To bill for your services.

- The Practice can use and share PHI to bill and get payment from health plans or other entities.
- Example: The Practice gives PHI to your health insurance plan so it will pay for your services.

2. Uses and Disclosures of PHI That May Be Made Without Your Authorization or Opportunity to Object

The Practice may use or disclose PHI without your authorization or an opportunity for you to object, including:

To help with public health and safety issues

Public health: To prevent or control the spread of disease, injury or disability, assist in product recalls, and report adverse reactions to medication, or if directed by a public health authority, to a government agency that is collaborating with the public health authority.

- Required by the Secretary of Health and Human Services: We may be required to disclose your PHI to the Secretary of Health and Human Services to investigate or determine our compliance with the requirements of the final rule on Standards for Privacy of Individually Identifiable Health Information.
- Health oversight: The Practice may disclose PHI to a health oversight agency for activities authorized by law, such as audits investigations, and inspections. Oversight agencies seeking this information include government agencies and organizations that provide financial assistance to the program (such as third-party payors, based on your prior consent) and peer review organizations performing utilization and quality control.
- Serious threat to health or safety: To prevent a serious and imminent threat.
- Abuse or Neglect: To report abuse, neglect, or domestic violence to a state or local agency that is authorized by law to receive reports of child or elder abuse and neglect.

To comply with law, law enforcement, or other government requests

- Required by law: If required by federal, state or local law.
- Judicial and administrative proceedings: To respond to a court order, subpoena (with written authorization), or discovery request, subject to disclosure exemptions permitted or required by law.
- Law enforcement: Practice may disclose PHI for the purpose of identifying a suspect,

material witness or missing person, or in connection with the victim of a crime, a deceased person, the reporting of a crime in an emergency, or with crime on the premises.

- Specialized Government Functions: For military or national security concerns, including intelligence, protective services for heads of state, or your security clearance.
- National security and intelligence activities: For intelligence, counterintelligence, protection of the President, other authorized persons or foreign heads of state, for purpose of determining your own security clearance and other national security activities authorized by law.
- Workers' Compensation: To comply with workers' compensation laws or support claims.

To comply with other requests

- Coroners and Funeral Directors: To perform their legally authorized duties.
- Organ Donation: For organ donation or transplantation.
- Research: For research that has been approved by an institutional review board and you authorize such research.
- Inmates: The Practice created or received your PHI in the course of providing care.
- Business Associates: To organizations that perform functions, activities or services on behalf of the Practice.

3. Uses and Disclosures of PHI That May Be Made With Your Authorization or Opportunity to Object

Unless you object, the Practice may disclose PHI:

To your family members or friends directly involved in your treatment or as necessary to prevent serious harm. In an emergency or when you cannot provide direction, if in the Provider's professional opinion he/she feels it is in your best interest because you are unable to state your preference.

4. Uses and Disclosures of PHI Based Upon Your Written Authorization

The Practice must obtain your written authorization to use and/or disclose PHI for the following purposes:

Marketing, sale of PHI, and psychotherapy notes.

You may revoke your authorization, at any time, by contacting the Practice in writing, using the information above. The Practice will not use or share PHI other than as described in Notice unless you give your permission in writing.

OUR RESPONSIBILITIES

- The Practice is required by law to maintain the privacy and security of PHI.
- The Practice is required to abide by the terms of this Notice currently in effect. Where more stringent state or federal law governs PHI, the Practice will abide by the more stringent law.
- The Practice reserves the right to amend Notice. All changes are applicable to PHI

collected and maintained by the Practice. Should the Practice make changes, you may obtain a revised Notice by requesting a copy from the Practice, using the information above, or by viewing a copy on the website www.lifetransitionsgroup.com

- The Practice will inform you if PHI is compromised in a breach.