

Retina Vitreous Consultants, Inc.

NOTICE OF HIPAA PRIVACY PRACTICES for All Office Locations

EFFECTIVE April 14, 2013

Please Read This Notice Carefully



This notice describes how medical information about you may be used and disclosed and how you can get access to this information.

Retina Vitreous Consultants, Inc. has adopted this Privacy Policy in order to recognize the requirement to comply with the Health Insurance Portability and Accountability Act ("HIPAA"), as amended by the Health Information Technology for Economic and Clinical Health ("HITECH") Act of 2009 (Title XIII of division A and Title IV of division B of the American Recovery and Reinvestment Act "ARRA") and the HIPAA Omnibus Final Rule (Effective Date: March 26, 2013). We acknowledge that full compliance with the HIPAA Final Rule is required by or before September 23, 2013.

We hereby acknowledge our duty and responsibility to protect the privacy and security of Individually Identifiable Health Information ("IIHI") generally, and Protected Health Information ("PHI") as defined in the HIPAA Regulations, under the regulations implementing HIPAA, other federal and state laws protecting the confidentiality of personal information, and under principles of general and professional ethics. We also acknowledge our duty and responsibility to support and facilitate the timely and unimpeded flow of health information for lawful and appropriate purposes.

Your Rights




You have the right to:

- **Inspect and copy your protected health information.** However, we may refuse to provide access to certain psychotherapy notes or information for a civil or criminal proceeding.
- **Request a restriction of your protected health information.** You may ask us not to use or disclose certain parts of your protected health information for treatment, payment or healthcare operations. You may also request that information not be disclosed to family members or friends who may be involved in your care. Your request must state the specific restriction requested and to whom you want the restriction to apply. We are not required to agree to a restriction that you may request, but if we do agree, then we must behave accordingly.
- **Request to receive confidential communication from us by alternative means or at an alternative location.** We will accommodate reasonable requests. We may also condition this accommodation by asking you for information as to how payment will be handled or specification of an alternative address or other method of contact. We will not request an explanation from you as to the basis for the request.
- **Ask your provider to amend your protected health information.** You may request an amendment of protected health information about you. If we deny your request for amendment, you have the right to file a statement of disagreement with us, and your medical record will note the disputed information.




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- **Receive an accounting of certain disclosures we may have made.** This right applies to disclosures for purposes other than treatment, payment or healthcare operations. It excludes disclosures we may have made to you, to family members or friends involved in your care or for notification purposes.
 - **You have the right to receive specific information regarding these disclosures.** The right to receive this information is subject to certain exceptions, restrictions and limitations.
 - **Obtain a paper copy of this notice from us,** upon request, even if you have agreed to accept this notice electronically.

Uses and Disclosures:

Retina Vitreous Consultants, Inc. uses health information about you:

- For treatment,
- To evaluate the quality of care you receive,
- To obtain payment for treatment,
- Continuity of care,
- And to share with your referring providers and primary care physicians.




Your information may be shared by paper mail, electronic mail, fax or other methods. We may use or disclose identifiable health information about you without your authorization in several situations, but beyond those situations, we will ask for your written authorization before using or disclosing any identifiable health information about you.

Below are examples of uses and disclosures of Protected Health Information:

This facility may use or be required to use your health information without your authorization or consent for normal business activities as follows:

For Care and Treatment: Health information obtained by a healthcare practitioner such as a physician, nurse, or therapist, will be entered into your medical record and used to determine a plan of care. For example, healthcare members will write and read what others have written such that your care can be coordinated and everyone is aware of how you are responding to your treatment plan. When you are discharged from this facility, your health information may go with you such that future healthcare providers will have a record of your care. Your health insurer may disclose health information to the sponsor of the plan.

For Billing and Payment: In addition to demographic information, information on a bill sent to an insurer may include health information. This health information is restricted to that which is needed for the financial transactions.



For Healthcare Operations: In order to provide quality care, healthcare providers at this facility may use your health information, for example, to analyze the care, treatment, and outcomes of your medical case and of others. This health information will be used to continually improve the care of the services that we provide to you.

For Business Associates: In order to provide quality care, this facility requires business services such as pharmacy, medical equipment, medical laboratories, information technology, etc. These services will have use of your health information as it pertains to their service delivery. Also, business associates must follow our standards for protecting your health information and sign a business associate

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agreement. In addition, the business associates must follow the HIPAA Security Rule as specified in the Health Information Technology for Economic and Clinical Health Act (HITECH)/Energy and Commerce Recovery and Reinvestment Act, Subtitle D, Section 4401.

For Notification: We may use or disclose health information, such as your general condition, to notify or assist in notifying a family member or person responsible for your care.

For Communication: We may use or disclose health information relevant to your care to family members or those that you deem responsible for your care on a need to know basis.

For Research: We may disclose health information to researchers if they have appropriate consent forms and the research has been approved by our institutional review board. The researchers will be held to this facility's health information privacy standards.

For Funeral Directors: We may disclose health information to funeral directors in accordance with state laws and for professional purposes only.

For Organ Procurement Organizations: Consistent with applicable law, we may disclose health information to organ procurement organizations or organizations involved in the procurement, banking, or transplantation of organs for the purpose of tissue donation and transplant.

For Marketing Purposes: We may contact you to provide information on appointment reminders or alternative treatments and services that may benefit you given your medical condition. In addition, a covered entity or business associates shall not directly or indirectly receive remuneration in exchange for any protected health information of an individual unless the covered entity obtained from the individual, in accordance with section 164.508 of title 45, Code of Federal Regulations, a valid authorization that includes, in accordance with such section, a specification of whether the protected health information can be further exchanged for remuneration by the entity receiving protected health information of that individual. Exceptions under HITECH include, when the purpose of the exchange is for research, public health, treatment, health care operations, providing an individual with a copy of their protected health information, and for remuneration that is provided by a covered entity to a business associate for activities involving the exchange of protected health information that the business associate undertakes on behalf of and that the specific request of the covered entity pursuant to a business associate agreement. The price charged must reflect not more than the costs of preparation and transmittal of the data for such purpose.

For Fundraising: We may contact you for fundraising efforts that are aligned with the mission of this facility.

For the Food and Drug Administration: As requested or required by the FDA, we may disclose health information relative to an adverse health condition related to food, food supplements, product and product defects related to food, or post marketing surveillance information to allow product recalls, repairs, or replacements.

For Workers Compensation Issues: In compliance with Worker's Compensation laws, health information may be revealed to the extent necessary to comply with the law and your individual case.

For Public Health Requirements: As required by law, health information may be disclosed to public health or legal authorities for the jurisdiction of disease, injury, or disability prevention or control.

For Correctional Institutions: Should you be an inmate in a correctional institution, health information may be disclosed to the institution or its agents that which would be necessary for your health and safety and the health and safety of other individuals.

For Law Enforcement Agencies: Health information may be disclosed to law enforcement agencies for purposes required by law or subpoena.

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For Judicial and General Administrative Proceedings: Patient health information may be released per minimum necessary requirements for proceedings.

For Healthcare Oversight: Patient health information may be used by health oversight agencies for activities such as audits, inspections, and licensure activities.

For Specialized Government Functions: In the event that appropriate military authorities require information, it may be released at the minimum necessary level.



For Victim of Abuse, Neglect, and Domestic Violence: Information may be released to social service agencies or protective services in order to protect an individual.

Emergencies: In an emergency treatment situation, your provider shall try to provide you a Notice of Privacy Practices as soon as reasonably practicable after the delivery of treatment.

Communication Barriers: We may use and disclose your protected health information if your provider attempts to obtain acknowledgement from you of the Notice of Privacy Practices but is unable to do so due to substantial communication barriers and the provider determines, using professional judgment, that you would agree.

Other uses and disclosures are to be made with your written authorization and you may revoke such authorization at any time.

Our Legal Duty:



We are required by law to protect the privacy of your information, provide notice about our information practices, follow the information practices in this notice as described, and seek your acknowledgement of receipt of this notice. You can request a copy of our notice at any time. We reserve the right to change our privacy policy without notice. The current notice will be posted in our waiting rooms.

Complaints:

If you are concerned that we have violated your privacy rights, or you disagree with a decision we made about access to your records, you may contact the privacy officer listed below. You may also send a written complaint to the U.S. Department of Health and Human Services. The person listed below can provide you with the appropriate address upon request.

Privacy Officer: Administrator
Retina Vitreous Consultants, Inc.
300 Oxford Drive Ste 300
Monroeville, PA 15146

Phone: 412-683-5300 ext 2020



Retina Vitreous Consultants, Inc. HIPAA Security Officer is business associate Joe Beierle, Vice President of Operations, Perfection Services, Inc, who is responsible for protecting your health information stored electronically, following the HIPAA Standards for the Security of Electronic Information.

Effective date: 04/13/2013