



iCircle NOTICE OF PRIVACY PRACTICES

THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Our Privacy Commitment to You

At iCircle, we will protect your privacy and share information about you only with those who need to know and are allowed to see the information to assure that you receive quality services. We will respect the confidentiality of your health information and will protect your information in a responsible and professional manner.

HIPAA Notice of Privacy Practices

This notice tells you who can see your protected health information (PHI). PHI is information that may identify you and your past, present or future physical or mental health condition, services and payments for these services.

This notice tells you when we have to ask you for your permission before we share your PHI. It also tells you when we can share your PHI without asking for your OK.

We are required by law to:

- Provide you with this notice of our legal responsibility to keep your health information private and safe.
- Protect your PHI. Ways that we do this:
 - Keep paper records and information in locked offices and files.
 - Shred paper records.
 - Have secure systems for electronic information saved on our computers.
 - Have policies and procedures to keep PHI information private and safe.
 - Train our employees on these rules.
- Follow this notice.
- Tell you if we think your PHI has been breached.

Rules for How We Can Share Your Information

If you tell us that it is OK with you we can share your PHI with your family or a person you choose.

We can use and share your PHI **without** your OK as follows:

- For treatment – to help doctors, hospitals and others get you the care you need.
- For payment – or to provide payment to doctors and other providers who provide you services.
- For operations – to maintain company operations and quality assurance functions to make our company better
- For appointment reminders
- For public health reasons
- With others who help with or pay for your care
- When we are required by federal, state or local law
- To report abuse and neglect
- If we receive a court order or subpoena
- To government and regulatory authorities – for inspections and audits
- Workers Compensation – if you get hurt at work
- Military and Veterans – if you are a member of the Armed Forces, we may release your health information to military authorities.
- Law Enforcement – to help the police or other law enforcement when required.
- Coroner, Medical Examiner, Funeral Director – we can provide your name and cause of death.
- Marketing – we may use your name and address to send you information about iCircle activities and events.

We will share your information for other reasons only if you give us your written permission.



You Have the Right To:

- Look at your record and get a copy.
- Ask us to change your record if you think it is wrong or something is missing.
- Ask for a list of the people who received your health information from iCircle.
- Ask iCircle not to use or share your health information in specific situations.
- Ask for a paper copy of this notice.
- Complain if you believe your privacy rights have been violated.

How to File a Complaint:

If you believe your privacy rights have been violated you can complain to:

- iCircle Privacy Officer 1-844-694-2273 – ask to speak to the Privacy Officer
- iCircle Corporate Compliance Hotline 585-347-1680
- Secretary of the U.S. Department of Health and Human Services, 200 Independence Avenue, S.W. Room 509F HHH Bldg., Washington, D.C. 20201
 - Email to OCRComplaint@hhs.gov,
 - or through the OCR Portal at:
www.hhs.gov/hipaa/filing-a-complaint/complaint-process/index.html