



Notice of Privacy Practices

TAKE TWO HEALTH
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Your Information.

Your Rights.

Our Responsibilities.

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.

YOUR RIGHTS

When it comes to your health information, you have legal rights. This section explains your rights and some of our responsibilities to help you.

Get a copy of your health and claims (billing) records:

- You can ask to see or get a copy of your health and claims records and other health information we have about you. This may access your records online anytime through our portal (embedded on the TAKE TWO HEALTH website at www.taketwohealth.com) or through the office as above.
- We will provide a copy or a summary of your health and claims records, usually within 30 days of your request. We reserve the right to charge a reasonable, cost-based fee.

Ask us to correct health or claims (billing) records:

- TAKE TWO HEALTH creates all of your medical records together with you, and you have full access through our web portal to see what is in your chart. If there is something inaccurate, or something you do not agree with, we want to know.
- You can ask us to correct, clarify or add your comments to your health records if you think they are incorrect or incomplete. You also have the right to ask us to review and recheck Medicare or Medicaid billing charges (claims), and make changes if appropriate, or explain why something was billed the way it was. Ask us whenever you have questions.

- We may say “no” to your request, but we’ll tell you why in writing within 60 days.

Request confidential communications:

- You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address.
- We will consider all reasonable requests, and must say “yes” if you tell us you would be in danger if we do not.

TAKE TWO HEALTH already takes your privacy very seriously. Beyond our standard practices, you can ask us to further limit what we use or share:

- You can ask us not to use or share certain health information for treatment, payment, or our operations.
- We are not required to agree to your request, and we may say “no” if it would affect your care.
- If you have Medicare or Medicaid, they may ask us for information in order to pay for your care. Because TAKE TWO HEALTH does not participate with commercial health insurance, we do not release your information to any other payors unless you specifically submit a request for us to do so.

Get a list of those with whom we’ve shared information:

- You can ask for a list (accounting) of the times we’ve shared your health information for six years prior to the date you ask, who we shared it with, and why.
- We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We’ll provide one accounting a year for free but may charge a reasonable, cost-based fee if you ask for another one within 12 months.

Get a copy of this privacy notice:

- You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.

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 and make choices about your health information.
- We will make sure the person has this authority and can act for you before we take any action.

File a complaint if you feel your rights are violated:

- You can complain if you feel we have violated your rights by contacting us using the information on page 1.
- 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/.
- We will not retaliate against you for filing a complaint.

YOUR CHOICES

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

In these cases, you have both the RIGHT and CHOICE to tell us to:

- Share information with family, close friends, or others involved in paying for your care
- Share information in a disaster relief situation
- Contact you for fundraising efforts

If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.

In these cases we NEVER share your information unless you give us written permission:

- Marketing purposes
- Sale of your information

OUR USES AND DISCLOSURES

How do we typically use or share your health information?

We typically use or share your health information in the following ways.

Help manage the health care treatment you receive:

- We can use your health information and share it with professionals who are treating you.
- Example: Another treating doctor or practitioner of yours sends us information about your diagnosis and treatment plan so we can arrange additional services.

Run our organization:

- We can use and disclose your information to run our organization and contact you when necessary.

- We are not allowed to use genetic information to decide whether we will give you care or the price of that care.
- Example: We use health information about you to develop better services for you.

Payment for your health services:

- We can use and disclose your health information related to payment for your health services.
- Example: If you have Medicare or Medicaid, we are required by law to bill through them, and they have the right to ask for notes about the care we are billing them for.

How else can we use or share your health information?

We are allowed or required to share your information in other ways – usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html.

Help with public health and safety issues

We can share health information about you for certain situations such as:

- Preventing disease
- Helping with product recalls
- Reporting adverse reactions to medications
- Reporting suspected abuse, neglect, or domestic violence
- Preventing or reducing a serious threat to anyone's health or safety

Do research

- If TAKE TWO HEALTH participates in any research, we only use or share “de-identified” statistical information, which has no personal identifying information attached
- Example: reporting to public health research what percentage of our patients are within a certain age range
- If an individual patient were to participate in any sort of research study (information-gathering or clinical trial, etc), there would be a separate Informed Consent process before a patient could be enrolled in any such research.

Comply with the law

- We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law.

Respond to organ and tissue donation requests and work with a medical examiner or funeral director

- We can share health information about you with organ procurement organizations.
- We can share health information with a coroner, medical examiner, or funeral director when an individual dies.

Address workers' compensation, law enforcement and other government requests

We can use or share health information about you:

- For workers' compensation claims
- For law enforcement purposes with a warrant or subpoena
- With health oversight agencies for activities authorized by law
- For special government functions such as military, national security, and presidential protective services, again only as authorized with a warrant or mandated by law

Respond to lawsuits and legal actions

- We can share health information about you in response to a court or administrative order, or in response to a subpoena.

There are federal and state laws that may additionally protect or restrict certain types of health information from use or disclosure, such as information regarding HIV/AIDS, mental health, genetic tests, alcohol and drug abuse, sexually-transmitted diseases and reproductive health, and child or adult abuse or neglect.

OUR RESPONSIBILITIES

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.

- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

For more information see:

www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html.

Changes to the Terms of This Notice

We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, on our web site, and we will mail a copy to you.

This notice applies to TAKE TWO HEALTH and is written and provided in accordance with Colorado and US Federal healthcare information laws.

By signing below, you acknowledge that you understand and accept these terms:

Signature of Patient Member

Date