**Right to Amend:** If you believe health information CCPC created is inaccurate or incomplete, you may ask CCPC to amend it. CCPC cannot delete or destroy any information already included in your medical record. You must provide a reason for your request. CCPC may deny your request if you ask to amend information that CCPC did not create (unless the person or entity that created the information is not available to make the amendment); that is not part of the health information CCPC maintains; that is not part of the information you are permitted by law to inspect and copy; or that is accurate and complete.

**Right to Accounting of Disclosures:** You have the right to ask for a (free) list of disclosures CCPC has made of your health information. CCPC is not required to list all disclosures, such as those you authorized. You must state a time period, which may not be longer than 6 years or include dates before April 14, 2003. If you request more than one accounting in a 12-month period, CCPC may charge you for the cost of the list. CCPC will tell you the cost; you may withdraw or change your request before the copy is made.

**Right to Request Restrictions:** You have the right to request a restriction or limit on how CCPC uses or discloses your health information. You must be specific in your request. You may restrict disclosure of your health information to a health plan if you choose to pay out-of-pocket in full for the services at the time they are provided. CCPC is not required to agree to every request for restriction. If CCPC agrees or is required to comply, CCPC will comply with the request unless the information is required to be disclosed by law or is needed in case of emergency. Example: You may want to pay cash in advance for services rather than have your insurance billed.

**Right to Request Confidential Contacts:** You have the right to request that CCPC contact you about medical issues in a certain way, such as by mail. You must specify how or where you wish to be contacted; CCPC will try to accommodate reasonable requests.

**Right to a Copy of This Notice:** You have the right to a paper or electronic copy of this Notice, which is posted and available at each location where medical services are provided and is on CCPC’s website. To obtain a paper copy of this notice, send a written request to CCPC, 85 Seymour Street, Hartford, CT 06106. Or just stop by the office and one will be provided to you.

**4. Changes to this Notice:** CCPC reserves the right to change this Notice and to make the revised Notice effective for health information CCPC created or received about you prior to the revision, as well as to information it receives in the future. Revised Notices will be posted and available at each location where medical services are provided and on CCPC’s website.

**5. Right to be Notified:** CCPC will notify you if your unsecured health information is breached.

**6. Complaints:** If you believe your privacy rights have been violated, you may file a complaint with CCPC or with the Secretary of the Department of Health and Human Services, Office of Civil Rights, 200 Independence Avenue, S.W., Room 509F, HHH Bldg., Washington, DC 20201. Submit a written complaint within 180 days of when you knew or should have known of the circumstance leading to the complaint. You will not be retaliated against for filing a complaint.

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**CONSULTING CARDIOLOGISTS, PC (CCPC)**

**NOTICE OF PRIVACY PRACTICES**

**EFFECTIVE DATE: SEPTEMBER 1, 2013**

This NOTICE describes how medical information about you may be used and disclosed and how you can get access to that information. It applies to all of your health information used to make decisions about your care that the Consulting Cardiologists, PC (CCPC) generates or maintains. Please review it carefully.

CCPC is required by law to protect the privacy of your health information, give you a Notice of CCPC’s legal duties and privacy practices, and follow the current Notice. It will be followed by all our physicians and staff.

**1. Uses and Disclosures of Your Health Information**

The following categories describe some of the ways that CCPC may use and disclose your health information.

**Treatment:** We may use protected health information about you to provide you with medical treatment or services and to coordinate and manage your care and any related services. Protected health information about you may be disclosed to hospitals, nursing facilities, doctors, nurses, technicians, medical students, and other personnel who are involved in your care. Example: Your physician consults with a specialist regarding your condition or coordinates services you may need, such as lab work and x-rays.

**Payment:** CCPC may use your health information for payment activities, such as to determine plan coverage, to bill/collection, or to help another health care provider with payment activities. Example: Your health information may be released to an insurance company to get approval of or payment for services.

**Operations:** CCPC may use your health information for uses necessary to run its healthcare businesses, such as to conduct quality assessment activities, train, or arrange for legal services. Example: CCPC may use your health information to conduct internal audits to verify proper billing procedures.

**Business Associates:** CCPC may disclose your health information to other entities that provide a service to CCPC or on CCPC’s behalf that requires the release of your health information, such as billing service, but only
if CCPC has received satisfactory assurance that the other entity will protect your health information.

Based Upon Your Written Authorization:

Other uses and disclosures of your protected health information will be made only with your written authorization, unless otherwise permitted or required by law as described below. You may revoke this authorization at any time, in writing, except to the extent that we have taken action in reliance on the use or disclosure indicated in the authorization.

CCPC must obtain your authorization to use or disclose your psychotherapy notes, unless the use is for Treatment by your provider.

Individuals Involved in Your Care or Payment for Your Care: CCPC may release your health information to a friend, family member, or legal guardian who is involved in your care or who helps pay for your care.

Directory: CCPC may include your name, location, general condition, and religious affiliation in a directory if you are staying overnight in the hospital. Your religious affiliation may be given to a clergy member, even if you are not asked for by name, and your other information may be released to people who ask for you by name.

Emergencies: We may use or disclose your protected health information in an emergency treatment situation. If this happens, your physician shall try to obtain your consent as soon as reasonably practicable after the delivery of treatment. If your physician or another physician in the practice is required by law to treat you and the physician has attempted to obtain your consent but is unable to obtain your consent, he or she may still use or disclose your protected health information to treat you.

Research: CCPC may use and disclose your health information to researchers for research. Your health information may be disclosed for research without your authorization if the authorization requirement has been waived or revised by a committee charged with making sure the disclosure will not pose a great risk to your privacy or that steps are being taken to protect your health information, to researchers to prepare for research under certain conditions, and to researchers who have signed an agreement promising to protect the information. Health information regarding deceased individuals can be released without authorization under certain circumstances.

Organ and Tissue Donation: If you are an organ donor, CCPC may release health information to organ donation banks or organizations that handle organ or tissue procurement or transplantation.

Fundraising/Marketing: CCPC may use (or release to a CCPC-related foundation) certain information such as your name, address, phone number and treatment dates for fundraising. If you do not want to be contacted for fundraising efforts, notify CCPC. CCPC will not use your health information to contact you for marketing purposes or sell your health information without your written permission.

2. Uses and Disclosures of Health Information Required/Permitted By Law. The following categories describe some of the ways that CCPC may be allowed or required to use or disclose your health information.

Required by Law/Law Enforcement: CCPC may use and disclose your health information if required by federal, state, or local law, such as for workers’ compensation, and if requested by law enforcement officials for purposes such as responding to a court order.

Public Health and Safety: CCPC may use and disclose your health information to prevent a serious threat to the health and safety of you, others, or the public and for public health activities, such as to prevent injury. Example: To report birth defects and cases of communicable disease.

Food & Drug Administration (FDA) and Health Oversight Agencies: CCPC may disclose health information about incidents related to food, supplements, product defects, or post-marketing surveillance to the FDA and manufacturers to enable product recalls, repairs, or replacements; and to health oversight agencies for activities authorized by law, such as audits.

Lawsuits/Disputes: If you are involved in a lawsuit/dispute and have not waived the physician-patient privilege, CCPC may disclose your health information under a court/administrative order, subpoena, or discovery request after attempting to inform you of the request.

Coroners, Medical Examiners, and Funeral Directors: CCPC may release your health information to coroners, medical examiners, or funeral directors to enable them to carry out their duties.

National Security/Intelligence Activities and Protective Services: CCPC may release your health information to authorized national security agencies for the protection of certain persons or to conduct special investigations.

Military/Veterans: CCPC may disclose your health information to military authorities if you are an armed forces or reserve member.

Inmates: If you are an inmate of a correctional facility or in the custody of law enforcement, CCPC may release your health information to a correctional facility or law enforcement official so they may provide your health care or protect the health and safety of you or others.

If CCPC wants to use and/or disclose your health information for a purpose not in this Notice or required/permited by law, CCPC must get specific authorization from you for that use and/or disclosure, and you may revoke it at any time by contacting CCPC.

3. Your Rights Regarding Your Health Information: You have the rights described below in regard to the health information that CCPC maintains about you. You must submit a written request to exercise any of these rights.

Right to Inspect/Copy: You have the right to inspect and get a copy of health information maintained by CCPC and used in decisions about your care. This right does not apply to psychotherapy notes and certain other information. To inspect and copy protected health information that may be used to make decisions about you, you must submit your request in writing to your CCPC treating physician. If you request a copy of the information, we may charge a fee for the costs of copying, mailing, or other supplies associated with your request. CCPC will have 30 days to comply with such requests. You may request a licensed health care professional chosen by CCPC to review a denial based on medical reasons; CCPC will comply with this decision.