

CAMINAR

NOTICE OF PRIVACY PRACTICES

EFFECTIVE JULY 1, 2021

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.

A. INTRODUCTION

During the course of providing services and care to you, Caminar gathers, creates, and retains certain personal information about you, known as “protected health information.” Protected health information consists of any information that relates to your physical or mental health, to any health care provided to you, or to payment for your care that identifies you or can be used to identify you.

This Notice of Privacy Practices describes our responsibilities and your rights regarding your health information, and informs you about the possible uses and disclosures of such information.

B. OUR RESPONSIBILITIES

We are required by federal and state law to maintain the privacy of your health information. We are also required by law to provide you with this Notice, which describes our legal duties and privacy practices with respect to your health information. We will abide by the terms of this Notice. Where requirements under California state law are more stringent than federal standards, we will follow California law. Additionally, records related to alcohol and substance use treatment may also be subject to special federal and state privacy laws. We will obey these laws when they are stricter than the provisions in this Notice.

We may change this or any future Notice and to make the new notice provisions effective for all health information that we handle. If the change reflects an important change in our privacy practices, we will provide an updated Notice to you or your legal representative. In all other situations, we will provide you with the new Notice upon request. In addition, the updated Notice will be posted in a clear and prominent place in the facility and on CAMINAR’s website.

C. USE AND DISCLOSURE WITH YOUR AUTHORIZATION

We will require a written authorization from you before we use or share your health information, unless we are permitted or required to do so by law without your authorization.

Except in very limited circumstances, we will require your written authorization to use or share your health information for marketing purposes, to sell your health information to a third party, or to use or share any psychotherapy notes.

We may share medical information about you with persons you authorize CAMINAR to communicate with. The extent of the disclosure will be determined by you.

We have prepared an authorization form for you to use that authorizes us to use or share your health information for the purposes set forth in the form. You are not required to sign the

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form as a condition to obtaining treatment or having your care paid for. If you sign an authorization, you may revoke it at any time by written notice. We then will not use or disclose your health information, except where we have already relied on your authorization.

D. HOW CAMINAR MAY USE AND DISCLOSE YOUR PROTECTED HEALTH INFORMATION WITHOUT YOUR AUTHORIZATION

CAMINAR may use or share your health information in the following ways:

Your Care and Treatment

- We can use your health information and share it with other professionals who are treating you. *For example, we may share your information with a doctor treating you for another medical condition.*
- In most cases, our staff will not use text messages to send or receive your health information. In rare circumstances, CAMINAR caregivers may need to communicate with each other by text message to address an emergency involving you, and these messages may contain health information.
- You can authorize us to communicate with you via text or email regarding very limited, non-clinical information such as your appointment times and dates. You may also authorize us to communicate by phone with others you designate regarding this limited, non-clinical information. We will ask that you sign a separate authorization form allowing us to communicate with you in this way.

Billing and Payment

- We may use or share your health information with public or private health insurers (such as health insurance companies, HMOs, Medicare, and Medi-Cal) in order to bill and receive payment for your treatment and services that you receive. *For example, the information on a bill may include information that identifies you, as well as your diagnosis, procedures, and supplies used.*
- We may also share your health information to health care providers in order to allow them to determine if they are owed any reimbursement for care that they have provided to you.

Health Care Operations

We may use your health information for our health care operations. These uses and disclosures are necessary to manage CAMINAR and to monitor our quality of services and care. *For example, we may use your health information to review our services and to evaluate the performance of our staff in caring for you.*

Individuals Involved in Your Care or Payment for Your Care

We may release medical information about you to the persons you authorize us to communicate with, or to your legal representative. These may include friends or family members who are involved in your medical care or someone who helps pay for your care. When allowed, we may also tell your family or friends your condition.

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Responding to Law Suits and Legal Actions

We may share your health information in response to a court or administrative order, or in response to a subpoena issued by a party to a law suit, an administrative tribunal, or a private arbitrator.

Workers' Compensation, Law Enforcement, and Other Government Requests

We may share your health information:

- To comply with California workers' compensation laws.
- For law enforcement purposes, such as responding to a court subpoena or search warrant.
- With law enforcement officials investigating crimes involving clients.
- For special government functions, such as military and national security.

Abuse Reporting

We will disclose health information about a client who is suspected to be the victim of abuse to the extent necessary to complete any oral or written report mandated by law. Under certain circumstances, we may disclose further health information about the client to aid the investigating agency in performing its duties.

Licensing and Public Health Activities

We may disclose your health information:

- To a government or private agency, such as the California Department of Public Health or the Medical Board of California, so they can carry out their oversight activities.
- To an agency authorized to collect information for purposes of preventing or controlling disease, injury, or disability.

Business Associates

We may contract with certain individuals or organizations, called "business associates," to provide services on our behalf. In these cases, we will have a contract with each business associate to maintain the confidentiality of your health information. *For example, this may include data processing, quality assurance, legal, or accounting services.*

Fundraising

CAMINAR does not contact program clients for fundraising purposes. Should our fundraising practices change in the future, you have the right to opt out of such communications, and we will provide you with a method for doing so.

Coroner, Safety, and Disaster Relief

We may disclose your health information:

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- Upon request to a coroner to allow the coroner to perform its duties.
- To prevent an immediate, serious threat to the safety of an identified person.
- To a public or private entity authorized to assist in disaster relief efforts.

Research

We may use or share your health information for research purposes if an institutional review board overseeing the research approves the use without a written authorization.

Other Disclosures

We will disclose health information about a client when otherwise required by law.

E. YOUR RIGHTS REGARDING PROTECTED HEALTH INFORMATION

You have the following rights with respect to your health information. To exercise these rights, contact CAMINAR, at 2600 South El Camino Real, Ste 200, San Mateo, CA 94403, Attn: Privacy Official.

Right to Request a Copy of the Notice of Privacy Practices

You have the right to request and receive a copy of CAMINAR's Notice of Privacy Practices in written or electronic form.

Right to Request Access

You have the right to request inspect and receive copies of your health records in paper or electronic format. We may provide the records to you or to someone whom you designate. In certain limited circumstances, CAMINAR may deny your request as permitted by law.

Right to Request Special Privacy Protections

- You have the right to request restrictions on the use and disclosure of your health information for treatment, payment or health care operations, or providing notifications regarding your identity and status to persons inquiring about or involved in your care.
- We are not required to grant your request, except where you ask us not disclose information to your health plan regarding care paid for by you or someone else out of pocket.
- If we agree to comply with your request, we will do so until you or we terminate the restriction, or in the event of an emergency.
- You also have the right to request that CAMINAR communicate health information to you or another recipient, by alternative means, or at alternative locations (*for example, at your home or office, or on your cellular phone*).

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Right to Request Amendment

You have the right to request an amendment to your health records maintained by CAMINAR. If your request is denied, you will receive a written notice, including the reasons for such denial, and an opportunity to submit a written statement disagreeing with the denial.

Right to an Accounting of Disclosures

You have the right to receive a list (an “accounting”) of disclosures of your health information created and maintained by CAMINAR for up to six (6) years prior to the date of your request, not including certain routine disclosures or disclosures of which you already are aware.

F. NOTIFICATION OF SECURITY BREACHES

We will notify you if a breach occurs that may have compromised the privacy or security of your health information.

G. COMPLAINTS

- If you believe that your privacy rights have been violated, you may file a complaint with CAMINAR verbally by calling (650) 372-4080, or in writing to 2600 South El Camino Real, Ste 200, San Mateo, CA 94403, Attn: Privacy Official.
- You may also contact the Office for Civil Rights, U.S. Department of Health and Human Services, 90 7th Street, Suite 4-100, San Francisco, CA 94103, Telephone: (800) 368-1019; Fax: (202) 619-3818; TDD: (800) 537-7697, or by visiting: www.hhs.gov/ocr/privacy/hipaa/complaints.
- **We will not retaliate against you if you file a complaint.**

H. FURTHER INFORMATION

If you have questions about this Notice of Privacy Practices or would like further information about your privacy rights, contact Caminar at (650) 372-4080 or in writing to Caminar, 2600 South El Camino Real, Ste 200, San Mateo, CA 94403, Attn: Privacy Official.