



NOTICE OF PRIVACY PRACTICES

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

Effective Date: July 2021

Kern Medical creates records of health care to provide quality care and comply with legal requirements. Kern Medical understands your health information is personal and private and commits to safeguarding it to the extent reasonably possible. The law requires Kern Medical to keep your health information private and to provide you this notice of our legal duties and privacy practices. The law also requires Kern Medical to follow the terms of this notice.

This notice outlines the limits on how Kern Medical will handle your health information. Under federal law, Kern Medical must provide a copy of this notice when you receive health care and related services from Kern Medical or participate in certain health plans administered or operated by the County of Kern and Kern Medical. Kern Medical reserves the right to change practices and make new provisions effective for all health information it maintains. You may request an updated copy of this notice at any time.

A. Use and Disclosure - General

Generally, except as otherwise specified below, Kern Medical may use and disclose the following health information, as allowed by state and federal law:

- 1. For treatment.** Kern Medical uses and discloses health information to provide you with health care and related services. For instance:
 - Nurses, doctors, or other Kern Medical employees may record your health information, and they may share such information with other Kern Medical employees.
 - Kern Medical may disclose health information to people outside Kern Medical involved in your care who provide treatment and related services.
 - Kern Medical may use and disclose health information to contact you to remind you about appointments for treatment or health care-related services.
 - In emergencies, Kern Medical may use or disclose health information to provide you treatment. Kern Medical will use its best effort to obtain your permission to use or disclose your health information as soon as reasonably practical.
- 2. For payment.** Kern Medical may bill you, insurance companies, or third parties. Information on or accompanying these bills may identify you, as well as diagnoses, assessments, procedures performed, and medical supplies used.
- 3. For health care operations.** Kern Medical may use information in your health record to assess the care and outcomes in your case to improve our services, and in administrative processes such as purchasing medical devices, or for auditing financial data.

4. **For health plan administration.** As administrator of certain health plans, such as Medicare and Medi-Cal Kern Medical may disclose limited information to plan sponsors. The law only allows using such information for purposes such as plan eligibility and enrollment, benefits administration, and payment of health care expenses. The law specifically prohibits use for employment-related actions or decisions.
5. For compliance with the Health Insurance Portability and Accountability Act (HIPAA)

B. Use and Disclosure Requiring Your Authorization

On a limited basis, Kern Medical may use and disclose health information only with your permission, as required by state and federal law:

1. From mental health records;
2. From substance abuse treatment programs; and
3. From **"results"** of HIV (Human Immunodeficiency Virus)

C. Use and Disclosure Requiring an Opportunity for You to Agree or Object

In certain cases, Kern Medical may use and disclose health information only if it informs you in advance and provides an opportunity to agree or object, as required by state and federal law:

1. Kern Medical may include your name, location in the facility, general condition, and religious affiliation in a facility directory while you are a patient so your family, friends and clergy can visit you and know how you are doing.
2. To individuals assisting with your treatment or payment.
3. To assist with disaster relief to notify your family about you.

D. Use and Disclosure NOT Requiring Permission or an Opportunity for You to Agree or Object

In specific cases consistent with state and federal law, Kern Medical may use and disclose certain health information without your permission and without providing you the opportunity to agree or object:

1. By a court order pursuant to an order of that court;
2. By a board, commission, or administration agency for purposes of adjudication pursuant to its lawful authority;
3. Pursuant to a subpoena, subpoena duces tecum, notice to appear or any provision authority discovery in a proceeding before a court or administrative agency;
4. Pursuant to a search warrant;
5. By a probate court investigator in the course of an investigation;
6. For public health activities, which may include the following:
 - Preventing or controlling disease, injury or disability;
 - Reporting births and deaths;
 - Reporting abuse or neglect of children, elders and dependent adults;
 - Reporting reactions to medications or problems with products;
 - Notifying people of recalls on products they may use; or,
 - Notifying a person exposed to or at risk to contract or spread a disease or condition.

KERN MEDICAL

7. For mandated reporting of abuse, neglect or domestic violence.
8. For health oversight activities necessary for the government to monitor the health care system, government programs and compliance with civil rights laws.
9. To the minimum extent necessary to comply with judicial and administrative proceedings when compelled by court order, or in response to a subpoena, discovery request or other lawful process as allowed by law.
10. To law enforcement:
 - About the victim of a crime if mandatory statutory reporting is required
 - About a death we believe may be the result of criminal conduct;
 - About criminal conduct at the hospital; or,
 - In emergency circumstances to report a crime, the location of a crime or crime victims, or the identity, description or location of a person who may have committed a crime.
11. To coroners, medical examiners and funeral directors as necessary for them to carry out their duties.
12. For organ donation once you are deceased.
13. For public health, publicly available information, not protected by a firewall or password on a government electronic site, de-identified information or information which is otherwise publicly available may be used without any need for approval and monitoring by an Institutional Review Board. *45 CFR 46.101(b)(4)

** 45 CFR 164.501, 164.508, 164.512(i), 164.514(e), 164.528, 164.532
14. To avert serious threats to the health and safety of you or others.
15. Regarding military personnel for activities deemed necessary by appropriate military command authorities to assure proper execution of a military mission.
16. To determine your eligibility for or entitlement to veterans' benefits.
17. To authorized federal officials for the conduct of lawful intelligence, counter-intelligence, and other national security activities.
18. To correctional institutions and other law enforcement custodial situations, inmates of correctional institutions or who are in custody of a law enforcement official.
19. To determine your eligibility for or enroll you in government health programs.
20. For Workers' Compensation or similar programs, to the minimum extent necessary.
21. As an Academic Medical Center, we may disclose your protected health information during rounds in discussion with Residents/Faculty as part of the education process.
22. To the Food Drug Administration to report adverse drug/food reactions or medical device issues.
23. To disaster relief organizations for the purpose of responding to disaster welfare emergencies.

KERN MEDICAL

24. By an arbitrator or arbitration panel, when arbitration is lawfully requested by either party, pursuant to a subpoena duces tecum issued under Section 1282.6 of the Code of Civil Procedure, or another provision authorizing discovery in a proceeding before an arbitrator or arbitration panel.
25. By the patient or the patient's representative pursuant to Chapter 1 (commencing with Section 123100) of Part 1 of Division 106 of the Health and Safety Code
26. In an emergency situation, the communication of patient information by radio transmission or other means between emergency medical personnel at the scene of an emergency, or in an emergency medical transport vehicle, and emergency medical personnel at a health facility.
27. The information may be disclosed to a third party for purposes of encoding, encrypting, or otherwise anonymizing data. However, no information so disclosed shall be further disclosed by the recipient in a way that would violate this part, including the unauthorized manipulation of coded or encrypted medical information that reveals individually identifiable information.
28. By a psychotherapist if it is necessary to prevent or lessen a serious and imminent threat to the health or safety of a reasonably foreseeable victim or victims, and the disclosure is made to a person or persons reasonably able to prevent or lessen the threat, including the target of the threat.
29. To an employee welfare benefit plan, to the extent that the employee welfare benefit plan provides medical care, and may also be disclosed to an entity contracting with the employee welfare benefit plan for billing, claims management, medical data processing, or other administrative services related to the provision of medical care to persons enrolled in the employee welfare benefit plan for health care coverage.

E. Marketing and Fundraising

1. Kern Medical will not disclose your health information for marketing fundraising, or other reasons not listed above without your prior written permission, and you may withdraw that permission in writing at any time. If you do, Kern Medical will no longer use or disclose health information about you for the reasons you permitted. You understand Kern Medical is unable to retract disclosures already made with your permission and must retain records of care already provided.

F. Health Information Exchange

1. Kern Medical may make your protected health information available electronically through a state, regional, or national health information exchange (HIE) service to other participating healthcare providers, health plans, and healthcare entities, as necessary for your treatment or payment for that treatment. Kern Medical's participation in HIE services also provides that we may see information about you from other health care providers. The purpose of this exchange of information is to improve coordination and efficiency of health care services for patients.
2. HIE participating entities are required to meet rules that protect the privacy and security of your health and personal information.

KERN MEDICAL

3. Your participation in the HIE is automatic, however you may choose at any time to opt out or to revoke your opt out status (opt back in). When requested, a patient may be provided with educational information about HIE's prior to their inclusion in the HIE.
4. The information shared via the HIE will include office visit dates, lab results, allergies, vaccinations, vital signs, health conditions, medication list, and past medical history. This information may include (as applicable) references related to mental health, HIV, substance use, and other sensitive medical conditions.
5. More information on any HIE in which our organization participates can be found on our website www.kernmedical.com

G. Rights and Responsibilities

With regard to health information, Kern Medical recognizes and commits to safeguard your:

1. **Right to request restrictions on certain use and disclosure.** You have the right to request restriction or limitation on the health information Kern Medical uses or discloses for treatment, payment or health care operations. Requests must be in writing and state: the information you want to limit; whether to limit use, disclosure, or both; and, to whom limits apply. For instance, you may ask not to disclose to your spouse or insurance carrier.
2. **Right to confidential communications.** You have the right to ask Kern Medical to communicate with you in a certain way, or at a certain location.
3. **Right to inspect and copy records.** You have the right to inspect and obtain copies of your health information. Requests must be in writing, and Kern Medical may charge you a fee for the costs of fulfilling your request. Kern Medical may deny requests to inspect or copy psychotherapy notes, mental health records, or materials for legal proceedings. You may ask for review of a denial by another health care professional chosen by Kern Medical. Kern Medical will comply with the results of that review. Individuals have a right to access their PHI in electronic format upon request, where it is available. Individuals have a right to access to PHI in a "designated record set" in form or format requested by the individual, if it is readily producible in such a form/format, or if not in a readable hard copy form or such other format as agreed by Kern Medical and the individual. Individuals have a right to receive in electronic format, and to transmit a copy of that PHI to an entity or person designated by the individual, such as another provider or a personal health record.
4. **Right to amend health records.** If information Kern Medical has about you is incorrect or incomplete, you may ask to amend it. Requests must be in writing, and provide a reason supporting your request. Kern Medical may deny your request if it is not in writing or does not include a reason supporting it. Kern Medical may deny requests if the information:
 - Was not created by Kern Medical;
 - Is not health information kept by or for Kern Medical;
 - Is not information you are permitted to inspect and copy; or,
 - Is accurate and complete.

KERN MEDICAL

5. **Right to an accounting of certain disclosures.** You have the right to ask for a listing of the last six years of disclosures of your health information since April 14, 2003, not pertaining to treatment, payment or health care operations. Requests must be in writing. The first list you request in a twelve-month period is free. The County may charge you the cost of providing or reproducing additional lists. When told the cost, you may withdraw or modify your request. Where an electronic medical record is used, individuals must be provided with an accounting of PHI disclosures for TPO (Treatment, Payment, Health Care Operations) for a 3-year period, including business associates. However, Kern Medical is not required to agree to the request. Kern Medical will grant an individual's request not to disclose PHI to a health plan for health care item or service where the individual has paid in full out of pocket.
 6. **Right to obtain a paper copy of the Notice of Privacy Practices upon request.**
 7. **Right to obtain an electronic copy of the Notice of Privacy Practices upon request.**
 8. **Right to file complaints without fear of retaliation.** Under law, Kern Medical cannot penalize you for filing a complaint. If you believe Kern Medical violated your privacy rights, you may file a complaint with the Kern Medical privacy officer, the California Department of Health Care Services, or with the Secretary of the U.S. Department of Health and Human Services.
 9. **Right to be notified of a breach/disclosure of your confidential information.** Under law, Kern Medical is required to notify you regarding a breach/disclosure of your confidential information by Kern Medical or a Business Associate. Notice of any breach will be made in accordance with State and Federal Laws.
 10. **Right to be notified following a breach of their unsecured PHI;**
 11. **Right to be contacted prior to any efforts to raise funds and to have the right to opt out of receiving such communications;**
 12. **Right to provide authorization for disclosures of PHI for marketing purposes and sales of PHI.**
 13. **Right that uses and disclosures not described in the Privacy Notice will be made only with the authorization from the individual; and**
 14. **Right that Kern Medical must state in their Privacy Notices that individuals have the right to restrict certain disclosures of PHI to a health plan when the individual (or any person other than the health plan) pays for the treatment at issue and pays out of pocket in full for such treatment.**
- H. **Kern Medical Associates and Employees** are entitled to the same privacy rights regarding their Employee Health File, and may contact KMC Employee Health Services with any requests for information. The Employee Health File is not a part of the KMC electronic health record system and therefore employee health information is not included in the Health Information Exchange system (section F above).

KERN MEDICAL

I. Privacy Complaint Contacts

<p>Kern Medical Center Compliance Office 1700 Mount Vernon Avenue Bakersfield, CA 93306 Compliance Hotline (661) 326-2665 Fax (661) 326-2869 TDD (661) 326-2880 Email: compliance@kernmedical.com</p>	<p>U.S. Department of Health and Human Services 200 Independence Avenue, S.W. Room 509F HHH Bldg. Washington, D.C. 20201 Toll-free at: 1-800-368-1019 TDD: 1-800-537-7697 OCRCComplaint@hhs.gov</p>
<p>DHCS Privacy Officer Department of Health Care Services 1501 Capitol Ave MS 0010 Sacramento, CA 95899-7413 Privacy Hotline:(916) 445-4646 Email: DHCSPrivacyOfficer@dhcs.ca.gov</p>	