LUMEA Privacy Policy

This Notice of Privacy Practices applies to Leavitt Medical (d.b.a. LUMEA, Inc., hereafter LUMEA). LUMEA has always been committed to the privacy of individually identifiable health information, called protected health information (PHI), entrusted to us by our customers and their patients. We make reasonable efforts to ensure the confidentiality of your PHI and will work with you to ensure your right to receive certain information under HIPAA is honored. Private patient information is never used in any marketing activity and is never sold to third parties.

1. Introduction

Under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), LUMEA has an obligation to maintain PHI privacy and to provide a notice of our legal duties and privacy practices regarding PHI.

Where those customers are healthcare providers, or "covered entities" (CEs), LUMEA is considered a "business associate" (BA), and has direct regulatory and contractual responsibilities regarding HIPAA and BA Agreements. Even where LUMEA is only a contractor with another business associate, we maintain a similar commitment to protecting PHI.

LUMEA's platform is accessed by secure website and requires a unique login and password in order to access the data. Users are only authorized to access information within their unit and cannot access additional information without express permission. Data is stored securely through Amazon Web Services (AWS). You can access their privacy policies here: https://aws.amazon.com/compliance/data-privacy-faq/

Employees are trained on their Privacy obligations when first hired, and refresher training is required annually. Each employee also signs a PHI confidentiality agreement. The employee training and confidentiality agreements records are maintained in employee files.

Employee breach of Privacy obligations may result in disciplinary action, including termination and possible criminal prosecution.

2. Use and Disclosure of PHI

The HIPAA Privacy and Security Rules define what healthcare providers are allowed to do with patient information and how the information is to be protected against unauthorized access and modifications

The following situations describe types of uses and disclosure of PHI that LUMEA may make:

- For Treatment LUMEA can use your health information and share it with other professionals who are treating you. For example, we provide your physician with your laboratory test results.
- **For Payment** LUMEA can use and share your health information to bill and get payment from health plans or other entities.
- To Run our Organization LUMEA can use and share your health information to run our business, improve your care, and contact you when necessary. For example, we use health information to evaluate the quality of our laboratory testing, accuracy of results, accreditation functions and for LUMEA's operation and management purposes. We may also disclose PHI to other health care providers or health plans that are involved in your care for their health care operations, such as to coordinate health care or health benefits.
- Business Associates LUMEA can use your PHI to business associates to perform certain business functions or provide certain business services. For example, we may use another company to perform billing services on our behalf. All of our business associates are required to maintain the privacy and confidentiality of your PHI. In addition, at the request of your health care provider or health plan, we may disclose PHI to their business associates to perform business functions or health care services. For example, we may disclose PHI to a business associate of Medicare for the purposes of a medical necessity review and audit.
- **Help with Public Safety** LUMEA can share health information about you in certain situations:
 - o for the purposes of preventing diseases
 - helping with product recalls
 - o reporting adverse reactions to medications
 - o reporting suspected abuse, neglect, or domestic violence
 - o preventing or reducing a serious threat to anyone's health or safety
- **Do Research** LUMEA can use or share your information for health research. Limited data or records may be viewed by researchers to identify patients who qualify for their research project or for other similar purposes, so long as the researchers do not remove or copy any of the PHI.

- Comply with the law LUMEA 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 lawsuits and legal actions** LUMEA can share health information about you in response to a court or administrative order, or in response to a subpoena.
- **Respond to organ and tissue donation requests** LUMEA can share health information about you with organ procurement organizations.
- Work with a medical examiner or funeral director We can share health information with a coroner, medical examiner, or funeral director when an individual dies.
- Address worker's compensation, law enforcement, and other government requests LUMEA can use or share health information about you:
 - o for worker's compensation claims
 - o for law enforcement purposes or with a law enforcement official
 - with health oversight agency for activities authorized by law
 - for special government functions such as military, national security, and presidential protective services
- **De-Identified Data and Limited Data Sets** LUMEA may use and disclose health information that has been "de-identified" by removing certain identifiers making it unlikely that you could be identified. LUMEA may also disclose limited health information using a "limited data set" which does not contain any information that can directly identify you. For example, a limited data set may include your city, county and zip code, but not your name or street address. Use of a Limited Data Set requires a Data Use Agreement.

Fully de-identified data is not considered PHI, thus not covered by HIPAA. See the Appendix for a detailed definition of Limited Data Set and Fully De-identified Data. For example, a limited data set may

3. Your Rights & Our Responsibilities Your Rights

- **Right to Receive a Copy of PHI:** You can ask to see or get an electronic or paper copy of the health information we have about you. We will provide you with a copy within 30 days of your request. We may charge a reasonable, cost-based fee. Please contact us if you wish to exercise this right.
- **Right to Correct Medical Record:** You can ask us to correct health information about you that you think is incorrect or incomplete. We may say "no" to your request, but we'll tell you why in writing within 60 days. Please contact us if you wish to exercise this right.

- **Right to 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 say "Yes" to all reasonable requests.
- Right to Request Limits on Uses and Disclosures of your PHI: 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 pay for a service out of pocket, you can ask us not to share that information with your health insurer. We will say "yes" unless a law requires us to share that information.
- Right to 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 those 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 per year for free, but will charge a reasonable, cost-based fee if you ask for another one within 12 months. We will provide an accounting to you in writing within 30 days of receiving your request.
- **Right to 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.
- **Right to 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.
- Right to 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 below. 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.hss.gov/ocr/privacy/hipaa/complaints/. We will not retaliate against you for filing a complaint.

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.

Minimum Information Necessary (i.e., Need to Know)

Any disclosure of PHI within LUMEA will be handled using the idea that a person should receive the "minimum necessary" information, or be informed on a need to know basis.

4. Changes to the Terms of this Notice

LUMEA reserves the right to make changes to the terms of this notice, and the changes will apply to all the information we have about you. The new notice will be available upon request, in our office, and on our website.

This Notice of Privacy Practices applies to the following organizations:

LUMEA, Inc 2889 Ashton Blvd, Suite 300 Lehi, UT 84043

Ph: 844-960-3658 Fax: 844-266-9834

Email: Support@lumea.org

Effective date: June 1, 2016 Revised Date: April 30, 2019

APPENDIX

Limited Data Set (LDS)

A Limited Data Set excludes direct identifiers of the individual or relatives, employers, or household members of the individual with certain exceptions including city, state, zip code, elements of dates, and other numbers, characteristics or codes not listed as direct identifiers.

- 1. Names;
- 2. Postal address information, other than the town or city, State, and zip code;
- 3. Telephone numbers;
- 4. Fax numbers;
- 5. Electronic mail addresses;
- 6. Social security numbers;
- 7. Medical record numbers;
- 8. Health plan beneficiary numbers;
- 9. Account numbers;
- 10. Certificate/license numbers;
- 11. Vehicle identifiers & serial numbers, including license plate numbers;
- 12. Device identifiers and serial numbers;
- 13. Web Universal Resource Locators (URLs);
- 14. Internet Protocol (IP) address numbers;
- 15. Biometric identifiers, including finger and voice prints; and
- 16. Full face photographic images and any comparable images.

Fully De-Identified Data

Fully De-Identified Data excludes all of the LDS data above, and additionally the following data elements are excluded:

- 1. All geographic subdivisions smaller than a State, including street address, county, precinct, and their equivalent geocodes, except for the initial three digits of a zip code under certain circumstances;
- 2. All elements of dates (except year) for dates directly related to an individual, including birth date, admission date, discharge date, date of death; and all individual ages over 89;
- 3. Any other unique identifying number, characteristic, or code, except as permitted under the implementation specifications for re-identification.