
Notice of Privacy Practices for Grey Genetics, LLC

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.**

This Notice of Privacy Practices outlines your rights and choices and your healthcare providers' responsibilities under HIPAA. It also provides you with specifics about Privacy Practices at Grey Genetics.

If you have any questions or concerns regarding this notice, please contact

Grey Genetics, LLC
Attn: Privacy Officer
223 Bedford Avenue, Suite 1137
Brooklyn, New York 11211
privacy@greygenetics.com
516-900-4363

YOUR RIGHTS

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

Get an electronic or paper copy of your medical record

- You can ask to see or get an electronic or paper copy of your medical record and other health information we have about you. Ask us how to do this.
- We will provide a copy or a summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee.

At Grey Genetics, any consultation notes will be securely sent to you as a PDF attachment following your appointment. If at any time you require another copy, this can be re-sent to you. A paper copy of your consult note can also be sent to you upon request for a reasonable, cost-based fee.

Ask us to correct your medical record

- You can ask us to correct health information about you that you think is incorrect or incomplete. Ask us how to do this.
- We may say "no" to your request, but we'll tell you why in writing within 60 days.

At Grey Genetics, most of the information we have about you will have been self-reported. Any corrections or additional information may be important for risk assessment and you are encouraged to report this information.

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.

At Grey Genetics, the default mode of communication will be through the patient portal or through encrypted email since this is the most secure way to communicate with you.

Ask us to 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 pay for a service or health care item out-of-pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer.
 - We will say “yes” unless a law requires us to share that information.

At Grey Genetics, we do not accept insurance. All services are paid for out-of-pocket in full, so we do not proactively share information with your insurer. Be advised that if you do submit a receipt to your insurer for possible reimbursement, your insurer may ask us for additional information.

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 will charge a reasonable, cost-based fee if you ask for another one within 12 months.

Grey Genetics is a privately owned LLC and is not affiliated with any medical centers. We will not sell your information or use it for marketing or fundraising purposes. A copy of your consult note following any sessions is sent only to you.

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.

At Grey Genetics, this notice is emailed to you when an appointment is scheduled. It is also available on our website. Upon request, we can also mail you a paper copy.

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.

At Grey Genetics, documentation of medical power of attorney or legal guardianship should be sent to privacy@greygenetics.com.

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. 2020, calling 1-877-696-6775, emailing OCRComplaint@hhs.gov, 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 your family, close friends, or others involved in your care
- Share information in a disaster relief situation
- Include your information in a hospital directory
- 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
- Most sharing of psychotherapy notes

In the case of fundraising:

- We may contact you for fundraising efforts, but you can tell us not to contact you again.

Grey Genetics will not sell your information or use it for marketing or fundraising purposes. Grey Genetics is a privately owned LLC, is not affiliated with any medical centers and does not keep or contribute to a hospital directory.

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.

Treat you

We can use your health information and share it with other professionals who are treating you.

Example: A doctor treating you for an injury asks another doctor about your overall health condition.

Grey Genetics, LLC is a privately owned LLC and is not part of or affiliated with any medical center. Although in many cases, you will be encouraged to share the information discussed and a copy of your consult note with your primary care provider or other healthcare providers, the responsibility of sharing or not sharing this information lies with you. If you do choose to share a copy of your genetics consult with your healthcare provider/s, and your healthcare provider reaches out to Grey Genetics for discussion or consultation, we will be happy to speak with them if you have given your verbal or written permission for us to do so. Sharing a copy of your consult note with your healthcare provider will also be considered authorization to discuss with your healthcare provider.

Grey Genetics will not share with any third party your personal and family health history or any genetic testing reports without your written or verbal permission. Exceptions to this would be if we were compelled to do so by federal or state laws or regulations; if you were not available to give consent (ex. if you were unconscious) and sharing the information could be important for your treatment; and upon your death, in which case your information may be shared with a medical examiner.

Run our organization

We can use and share your health information to run our practice, improve your care, and contact you when necessary.

Example: We use health information about you to manage your treatment and services.

Bill for your services

We can use and share your health information to bill and get payment from health plans or other entities.

Example: We give information about you to your health insurance plan so it will pay for your services.

At Grey Genetics, your personal information is used for payment (ex. by your credit card company). We do not accept insurance and so do not routinely share information with your insurer. If you choose to submit a receipt to your insurer for reimbursement, Grey Genetics may be subsequently contacted by your insurer to supply additional information for purposes of reimbursement to you or coverage of related health services. In this scenario, we will make a good faith effort to get in touch with you and confirm that you are aware of the request for information that your insurer is making of us and wish us to comply with your insurer's request.

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

We can use or share your information for health 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

We 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.

At Grey Genetics, upon your death, your information, including any genetic testing results, may be shared with a medical examiner. Genetic testing results in these situations can be important for related diagnoses of family members.

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 or with a law enforcement official
- With health oversight agencies for activities authorized by law
- For special government functions such as military, national security, and presidential protective services

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.

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 on our web site.

Effective Date: 04-04-2019

Acknowledgment of Receipt of Notice of Privacy Practices for Grey Genetics, LLC

The Notice of Privacy Practices outlines your rights and choices and your healthcare providers' responsibilities under HIPAA. It also provides you with specifics about Privacy Practices at Grey Genetics.

You should have been provided with a paper copy of the Notice of Privacy Practices for Grey Genetics in advance of your appointment. A copy is also available online at <https://greygenetics.com/privacy/>

By signing below, I am acknowledging that I have received the Notice of Privacy Practices for Grey Genetics.

_____ (Signature of Patient or Personal Representative)

_____ (Name of Patient or Personal Representative)

_____ (Description of Personal Representative's Authority)

_____ (Date)

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