GOLDEN HILL HEALTH CARE CENTER NOTICE OF PRIVACY PRACTICES

We recognize the sensitive nature of personal health information. We are committed to protecting your privacy as well as your health. Therefore, the following Notice of Privacy Practices describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

USES AND DISCLOSURES OF HEALTH INFORMATION

Pursuant to law, we may use health information about you for treatment (such as sending your medical record information to a specialist physician as part of a referral), to obtain payment for treatment (such as sending billing information to a health insurance plan), for administrative purposes, and to evaluate the quality of care that you receive (such as comparing resident data to improve treatment methods).

Although the law does not require that we obtain a signed consent from you for treatment, payment, or healthcare operation purposes, we encourage you to sign a consent so that you are aware of our concern and practices regarding protection of your personal health information.

Our policies and procedures are designed to protect your privacy. We may need to use or disclose identifiable health information about you without your authorization for several other reasons, such as required by law. Subject to certain requirements, we may disclose health information for public health purposes, abuse or neglect reporting, auditing purposes, research studies, funeral arrangements, organ donation, workers' compensation purposes, and/or emergencies. We provide information when otherwise required by law, such as for law enforcement in specific circumstances. We may also contact you about appointment reminders or treatment alternatives or to raise funds. In any other situation, we will ask for your written authorization before using or disclosing any identifiable health information about you. If you choose to sign an authorization to disclose information, you can later revoke that authorization to stop any future uses and disclosures.

We may change our policies in the future. Before we make a significant change in our policies, we will change our notice and post the new notice in the waiting area, in each examination room, and on our Web site. You can also request a copy of our notice at any time. For more information about our privacy practices, please contact the person listed below.

INDIVIDUAL RIGHTS

In most cases, you have the right to look at or get a copy of health information about you that we use to make decisions about you. If you request copies, Golden Hill may charge you a photocopying fee. You also have the right to receive a list of instances where we have disclosed health information about you for reasons other than treatment, payment, or related administrative purposes. If you believe that information in your record is incorrect, or if important information

is missing, you have the right to request that we correct the existing information or add the missing information.

You have the right to request that your health information be communicated to you in a confidential manner such as sending mail to an address other than your home. If this notice was sent to you electronically, you may obtain a paper copy of the notice.

You may request in writing that we not use or disclose your information for treatment, payments, or administrative purposes or to persons involved in your care except when specially authorized by you, when required by law, or in emergency circumstances. We will consider your request but are not legally required to accept it.

COMPLAINTS

If you are concerned that we have violated your privacy rights, or you disagree with a decision we made about access to your records, you may contact the person listed below. You may also send a written complaint to the U.S. Department of Health and Human Services. The person listed below can provide you with the appropriate address upon request. Under no circumstances will you be retaliated against for filing a complaint.

OUR LEGAL DUTY

We are required by law to protect the privacy of your information, provide this notice about our information practices, and follow the information practices that are described in this notice.

If you have any questions or complaints, please contact:

Cindy Beisel, Privacy Officer Golden Hill Health Care Center 99 Golden Hill Drive Kingston, NY 12401 (845) 340-3390