

## **CCC Diagnostics Privacy Policy**

CCC Diagnostics, LLC (CCCD) is a molecular diagnostic company focused on establishing drug response predictions as guides for selection of effective chemotherapy treatment. Utilizing its specialized diagnostic service, CCCD assists physicians in designing personalized treatment regimens for patients fighting breast cancer.

CCC Diagnostics is committed to protecting the confidentiality of individuals' laboratory test results and other patient protected health information (PHI) that we collect or create as part of our diagnostic testing activities. We will only use or disclose the minimum amount of your PHI we consider necessary to perform a job or complete an activity. This Notice applies to all PHI that we maintain. Your doctor may have different notices regarding his/her use and disclosure of your PHI created in his/her office.

CCC Diagnostics is required by law to maintain the privacy of health information that identifies you, called protected health information (PHI), and to provide you with notice of our legal duties and privacy practices regarding PHI. Your PHI includes personal and medical information (such as your name, address, date of birth, test ordered, etc.) that we obtain from you, your physician, health plan, or other sources. Your PHI also includes the laboratory testing results that we create.

CCC Diagnostics is required to abide by the terms of the Notice of Privacy Practices currently in effect. We reserve the right to change the terms of this Notice of Privacy Practices and to make the provisions of the new Notice of Privacy Practices effective for all PHI that we maintain. The current Notice will be displayed on our website and a copy is available upon request.

This Notice is Effective as of March 8, 2010.

### **CCC Diagnostics Use and Disclosure of PHI**

Your PHI will be used or disclosed for treatment, payment, or healthcare operations purposes and for other purposes permitted or required by law. Though every use or disclosure is not listed, it will fall under one of the categories listed below.

If your PHI is to be disclosed outside of the parameters set forth by the HIPAA laws, we **MUST** obtain your written authorization. You have the right to revoke your authorization at any time, except if we have already made a disclosure based on that authorization.

#### *Treatment*

CCC Diagnostics may use or disclose PHI for treatment purposes, including disclosure to physicians, nurses, and other health care professionals who provide you with health care services and/or are involved in the coordination of your care, such as providing your physician with your laboratory test results.

### *Payment*

We will use your PHI in our billing departments and disclose your PHI to bill and collect payment for laboratory services we provided. For example, we may send your name, date of service, test performed, diagnosis code, and other information to a health plan so that the plan will pay us for the services we provided. In some cases, we may have to contact you to obtain billing information or for other billing purposes. When required, we may use an outside collection agency to obtain payment.

### *Health Care Operations*

We may use or disclose your PHI as required to support our health care operations and activities. For example, performing quality checks on our testing, or for developing normal reference ranges for tests that we perform.

### *Business Associates*

We may disclose PHI to our business associates to perform certain business functions on our behalf. For example, we may use another company to perform billing services. 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 providers or health plan, we may disclose PHI to their business associates for purposes of performing certain business functions or health care services on their behalf. For example, we may disclose PHI to a business associate of Medicare for purposes of medical necessity review and audit.

### *As Required By Law*

We may use and disclose PHI without individual authorization as required by law, including but not limited to statute, regulation, or court orders. For example, we are required to disclose your PHI to the Secretary of the U.S. Department of Health and Human Services ("HHS") upon request. Also, we must provide you a copy of your PHI at your request, except in when restricted or prohibited by state law.

### *Public Health*

We may disclose PHI to: (1) public health authorities authorized by law to collect or receive such information for preventing or controlling disease, injury, or disability and to public health or other government authorities authorized to receive reports of child abuse and neglect (2) entities subject to FDA regulation regarding FDA regulated products or activities (3) individuals who may have contracted or been exposed to a communicable disease when notification is authorized by law; and (4) employers, regarding employees, when requested by employers, for information concerning a work-related illness or injury or workplace related medical surveillance, because such information is needed by the employer to comply with the Occupational Safety and Health Administration (OHS), the Mine Safety and Health Administration (MHS), or similar state law.

### *Serious Threat to Health or Safety*

We may disclose PHI that they believe is necessary to prevent or lessen a serious and imminent threat to a person or the public, when such disclosure is made to someone they believe can

prevent or lessen the threat (including the target of the threat). We may also disclose to law enforcement if the information is needed to identify or apprehend an escapee or violent criminal.

#### *Health Oversight*

We may disclose PHI to health oversight agencies (as defined in the Rule) for purposes of legally authorized health oversight activities, such as audits and investigations necessary for oversight of the health care system and government benefit programs

#### *Judicial and Administrative Proceedings*

We may disclose PHI in a judicial or administrative proceeding if the request for the information is through an order from a court or administrative tribunal. Such information may also be disclosed in response to a subpoena or other lawful process if certain assurances regarding notice to the individual or a protective order are provided.

#### *Law Enforcement Purposes*

We may disclose PHI to law enforcement officials for law enforcement purposes under the following six circumstances, and subject to specified conditions: (1) as required by law (including court orders, court-ordered warrants, subpoenas) and administrative requests; (2) to identify or locate a suspect, fugitive, material witness, or missing person; (3) in response to a law enforcement official's request for information about a victim or suspected victim of a crime; (4) to alert law enforcement of a person's death, if the covered entity suspects that criminal activity caused the death; (5) when a covered entity believes that protected health information is evidence of a crime that occurred on its premises; and (6) by a covered health care provider in a medical emergency not occurring on its premises, when necessary to inform law enforcement about the commission and nature of a crime, the location of the crime or crime victims, and the perpetrator of the crime.

#### *Decedents*

We may disclose PHI to a coroner, medical examiner, or funeral director for the purpose of identifying a deceased person, determining cause of death, or for performing some other duty authorized by law.

#### *Cadaveric Organ, Eye, or Tissue Donation*

We may use or disclose protected health information to facilitate the donation and transplantation of cadaveric organs, eyes, and tissue.

#### *Research*

"Research" is any systematic investigation designed to develop or contribute to generalizable knowledge. The Privacy Rule permits the use and disclosure of PHI for research purposes, without an individual's authorization under the following parameters: (1) documentation that an alteration or waiver of individuals' authorization for the use or disclosure of protected health information about them for research purposes has been approved by an Institutional Review Board or Privacy Board; (2) representations from the researcher that the use or disclosure of the protected health information is solely to prepare a research protocol or for similar purpose preparatory to research, that the researcher will not remove any protected health information

from the covered entity, and that protected health information for which access is sought is necessary for the research; or (3) representations from the researcher that the use or disclosure sought is solely for research on the protected health information of decedents, that the protected health information sought is necessary for the research, and, upon request, documentation of the death of the individuals about whom information is sought. We also may use or disclose, without an individuals' authorization, a limited data set of protected health information for research purposes.

#### *Essential Government Functions*

An authorization is not required to use or disclose PHI for certain essential government functions. Such functions include: assuring proper execution of a military mission, conducting intelligence and national security activities that are authorized by law, providing protective services to the President, making medical suitability determinations for U.S. State Department employees, protecting the health and safety of inmates or employees in a correctional institution, and determining eligibility for or conducting enrollment in certain government benefit programs.

### **Patient Rights Regarding PHI**

#### *Access*

You have the right to review and obtain a copy of PHI that may be used in whole or part, to make decisions about your care or payment for your care. However, your request may be denied due to federal and state laws. For example, federal and state laws that prohibit a lab from providing test results directly to a patient.

#### *Amendment*

You have the right to amend your PHI if that information is inaccurate or incomplete. We reserve the right to deny such requests, and will submit a written statement of that denial.

#### *Disclosure Accounting*

You have a right to an accounting of the disclosures of your PHI by a CCC Diagnostics for a period up to six years prior to the date of your written request. The Privacy Rule does not require accounting for disclosures for treatment, payment, or health care operations or disclosures made based on your written authorizations.

#### *Restriction Request*

You have the right to request that we limit: 1) how we use and disclose your PHI for treatment, payment, and health care operations activities; or 2) our disclosure of PHI to individuals involved in your care or payment for your care. CCC Diagnostics will consider your request, but we are not required to agree to it. If we agree to it, we will state the agreed restrictions in writing and will abide by them, except for purposes of treating the individual in a medical emergency.

#### *Confidential Communications Requirements*

You have the right to request an alternative means or location for receiving communications of PHI other than those means we typically employ.

### *Notice of Privacy Practices*

You have the right to obtain a copy of CCC Diagnostics' privacy practices.

### **How to exercise your rights**

To exercise any of your rights described in this notice, you must send a written request to:

HIPAA Privacy Officer  
CCC Diagnostics  
Caton Research Center  
3918 Vero Road, Suite B  
Baltimore, MD 21227

Patients may update insurance by contacting the Patient Billing department at the number or email below:

Customer Service  
(410) 633-4885 x1002  
Email: [customerservice@cccdiag.com](mailto:customerservice@cccdiag.com)

### **How you may obtain a copy of CCC Diagnostics Privacy Notice**

You have the right to request a paper copy of our Privacy Practice Notice. To obtain a copy please contact: [privacyofficer@cccdiag.com](mailto:privacyofficer@cccdiag.com), call us at (410) 633-4885 and ask for the CCC Diagnostics HIPAA Privacy Officer, or send a written request to:

HIPAA Privacy Officer  
CCC Diagnostics  
Caton Research Center  
3918 Vero Road, Suite B  
Baltimore, MD 21227

Our online privacy notice, which describes our online privacy practices, may be viewed at the following address: [cccdiag.com/privacy-policy/online-privacy-policy](http://cccdiag.com/privacy-policy/online-privacy-policy)

### **How to File Complaints**

If you believe your privacy rights have been violated, you have the right to register a complaint with CCC Diagnostics or the Secretary of the U.S. Department of Health and Human Services. CCC Diagnostics will not take retaliatory action against you for filing a complaint about our privacy practices.

To file your complaint with CCC Diagnostics please contact: [privacyofficer@cccdiag.com](mailto:privacyofficer@cccdiag.com), call us at (410) 633-4885 and ask for the CCC Diagnostics HIPAA Privacy Officer, or send a written complaint to:

HIPAA Privacy Officer  
CCC Diagnostics  
Caton Research Center  
3918 Vero Road, Suite B  
Baltimore, MD 21227