



Notice of Privacy Practices

This notice describes how information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

OUR RESPONSIBILITIES REGARDING YOUR HEALTH INFORMATION

AlliedPath Inc., a Solid Tumor Cancer Molecular Diagnostics Laboratory, is required to:

- maintain the privacy of your health information.
- provide you with a notice as to its legal duties and privacy practices with respect to information it collects and maintains about you.
- abide by the terms of this notice.
- notify you if it is unable to agree to a requested restriction.
- accommodate reasonable requests you may have to communicate health information by alternative means or at alternative locations.

We reserve the right to change its practices and to make the new provisions effective for all protected health information it maintains. Should our information practices change and affect you, AlliedPath will mail a revised notice to the address we have on file for you.

AlliedPath will not use or disclose your health information without your authorization, except as described in this notice.

HOW THE LABORATORY MAY USE AND DISCLOSE YOUR HEALTH INFORMATION

The following categories describe different ways that the laboratory may use and disclose health information. Not every use or disclosure in a category will be listed. However, all of the ways the laboratory is permitted to use and disclose information will fall within at least one of these categories.

For payment:

A bill may be sent to you or a third party (insurance company/HMO) payer. The information on or accompanying the bill may include information that identifies you, as well as your diagnosis, procedures, and supplies used.

For healthcare operations:

Members of the laboratory medical staff, the risk or performance improvement manager, or members of the quality improvement team may use information in your health record to assess the care and outcomes in your case and others like



it. This information is used to continually improve the quality and effectiveness of the healthcare and service the laboratory provides.

Business associates:

There are some services provided in the laboratory through contacts with business associates. When services are contracted, the laboratory may disclose your health information to its business associates so that they can perform the job the laboratory has asked them to do. To protect your health information, however, the laboratory requires the business associate to appropriately safeguard your information.

Research:

The laboratory may disclose information to researchers when their research has been approved and established protocols to ensure the privacy of your health information have been set.

Patient mailings and communications:

The laboratory may contact you with information about health-related benefits and services that may be of interest to you.

Workers compensation:

The laboratory may disclose health information to the extent authorized by and to the extent necessary to comply with laws relating to workers compensation or other similar programs established by law.

Public health:

As required by law, the laboratory may disclose your health information to public health or legal authorities charged with preventing or controlling disease, injury, or disability.

Correctional institution:

Should you be an inmate of a correctional institution, the laboratory may disclose to the institution or its agents health information necessary for your health and the health and safety of other individuals.

Law enforcement:

The laboratory may disclose health information for law enforcement purposes as required by law or in response to a valid subpoena.

Federal law makes provision for your health information to be released to an appropriate health oversight agency, public health authority or attorney, provided that a work force member or business associate believes in good faith that the laboratory has engaged in unlawful conduct or have otherwise violated professional or clinical standards and are potentially endangering one or more

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Confidential and Proprietary.



patients, workers or the public.

MORE STRINGENT PROTECTION FOR YOUR HEALTH INFORMATION

HIPAA is a federal law that generally governs healthcare activities despite contrary state law mandates. However, in certain circumstances, state law will prevail if it: (1) allows for the use of PHI to file reports required by law; (2) allows for the disclosure of PHI to participate in public health surveillance, investigation, or intervention; (3) has been "excepted" from HIPAA by a formal determination; (4) authorizes or prohibits disclosure of PHI about a minor to a parent or other authorized caregiver; or (5) is more stringent (i.e. it provides more protection or rights to an individual).

In addition, state law mandates regarding medical record retention periods may be more stringent than federal law. Please be aware that any request for release of PHI must be considered on a case-by-case basis. If you desire further information about specific state laws and regulations that may not be preempted by HIPAA, please contact AlliedPath's Compliance Department.

YOUR RIGHTS REGARDING YOUR HEALTH INFORMATION

Although the laboratory owns the physical documents related to your health information, you have the following rights regarding the health information maintained about you:

Right to Inspect and Copy:

You have the right to inspect and obtain a copy of the health information that may be used to make decisions about your care. Usually, this includes medical and billing records.

To inspect and copy health information, you must sign an authorization to release the information that can be obtained from our Compliance Department. If you request a copy of the information, the laboratory may charge a fee for the costs of copying, mailing or other supplies associated with your request.

Right to Amend:

If you feel that health information the laboratory has about you is incorrect or incomplete, you may ask that it be amended.

To make a correction, your request must be made in writing to the Compliance Officer. AlliedPath's address can be found on our website at www.alliedpath.com

In addition, you must provide a reason that supports your request.

The laboratory may deny your request if it is not in writing or does not include a



reason to support the request. In addition, the laboratory may deny your request if you ask us to change information that:

1. was not created by us.
2. is not part of the health information kept by the laboratory.
3. is not part of the information that you would be permitted to inspect and copy.
4. is accurate and complete in the opinion of the laboratory.

Right to Confidential Communications:

You have the right to request that we communicate with you about medical matters in a certain way or at a certain location. For example, you can ask that we only contact you at work or at home, or send billing information to an alternative address.

Right to an Accounting of Disclosures:

You have the right to request an "accounting of disclosures". This is a list of the disclosures the laboratory made concerning your health information. To request an accounting of disclosures, you must write to the Manager, Client Services Department. Your request must state a time period that may not be longer than six years. One request within a 12-month period will be free. For additional lists, the laboratory may charge you for the costs of providing the list.

Right to Request Restrictions:

You have the right to request a restriction or limitation on the health information the laboratory uses or discloses about you for treatment, payment or health care operations. You also have the right to request a limit on the health information the laboratory discloses about you to someone who is involved in your care or the payment for your care, like a family member or friend.

To request restrictions, you must write to the Manager, Client Services Department. In your request, you must describe (1) what information you want to limit; (2) whether you want to limit our use, disclosure or both; and (3) to whom you want the limits to apply, for example, disclosures to your spouse.

The laboratory is not required to agree to your request. If the laboratory agrees, it will comply with your request. You may not limit uses and disclosures that are legally required or allowed by law or regulation.



RIGHT TO A COPY OF THIS NOTICE

You may obtain a copy of this notice at any time from our web site, www.alliedpath.com.

CHANGES TO THIS NOTICE

The laboratory reserves the right to change this notice from time to time for past, current or future information. The new notice will contain the effective date on its first page. You can view the current notice at www.alliedpath.com.

COMPLAINTS

If you believe your privacy rights have been violated, you may file a complaint with the laboratory or with the Secretary of the Department of Health and Human Services without fear that you will be retaliated against for filing a complaint.

If you have any questions about this notice or any complaints about the laboratory's privacy practices, or would like to know how to file a complaint with the Secretary of the Department of Health and Human Services, please contact AlliedPath's Compliance Officer at **1-877-9MDX-LAB (1-877-963-9522)**.

You may not be penalized for filing a complaint.