



Berkeley Cardiovascular MEDICAL GROUP

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NOTICE OF PRIVACY PRACTICES

Uses and Disclosures

Treatment. Your health information may be used by staff members or disclosed to other health care professionals for the purpose of evaluating your health, diagnosing medical conditions, and providing treatment. For example, results of laboratory tests and procedures will be available in your medical record to all health professionals who may provide treatment or who may be consulted by staff members.

Payment. Your health information may be used to seek payment from your health plan, or for other sources of coverage. Your health plan may request and receive information on dates of service, the services provided and the medical condition being treated.

Health care operations. Your health information may be used as necessary to support the day-to-day activities and management of Berkeley Cardiovascular Medical Group. For example, information on the series you received may be used to support budgeting and financial reporting, and activities to evaluate and promote quality.

Law enforcement. Your health information may be disclosed to law enforcement agencies to support government audits and inspections, to facilitate law-enforcement investigations, and to comply with government-mandated reporting.

Public health reporting. Your health information may be disclosed to public health agencies as required by law. For example, we are required to report certain communicable diseases to the state's public health department.

Other uses and disclosure. These require your authorization. Disclosure of your health information or its use for any purpose other than those listed above require your specific written authorization. If you change your mind after authorizing the use or disclosure of your information you may submit a written revocation of the authorization. However, your decision to revoke the authorization will not affect or undo any use or disclosure of information that occurred before you notified us of your decision to revoke your authorization.

Appointment reminders. Your health information may be used by our staff to send you appointment reminders.

Information about treatment. Your health information may be used to send you information that you may find interesting on the treatment and management of your medical condition. We may also send you information describing other health-related products and services that we believe may interest you.

Main Office • 3300 Webster Street • Suite 410 • Oakland • California • 94609
(510) 549-4220 • FAX (510) 433-0744 • www.bcvmg.com

Cardiac Testing Suite • 3300 Webster Street • Suite 404 • Oakland • California • 94609
(510) 549-4220 • FAX (510) 433-0703

Lafayette (satellite office) • 3466 Mt. Diablo Blvd. • Suite C 100 • Lafayette • California • 94949
(510) 549-4220 • FAX (510) 433-0744

Individual Rights. You have certain rights under the federal privacy standards. These include:

- The right to request restrictions on the use and disclosure of your protected health information
- The right to receive confidential communications concerning your medical condition and treatment
- The right to inspect and copy your protected health information
- The right to amend or submit corrections to your protected health information
- The right to receive an accounting of how and to whom your protected health information has been disclosed
- The right to receive a printed copy of this notice.

Berkeley Cardiovascular Medical Group Duties. We are required by law to maintain the privacy of your protected health information and to provide you with this notice of privacy practices. We are also required to abide by the privacy policies and practices that are outline in this notice.

Right to Revise Privacy Practices. As permitted by law, we reserve the right to amend or modify our privacy policies and practices. These changes in our policies and practices may be required to be changed by federal and state laws and regulations. Upon request we will provide you with the most recently revised notice on any office visit. The revised policies and practices will be applied to all protected information we maintain.

Requests to Inspect Protected Health Information. You may generally inspect or copy your protected health information that we maintain. As permitted by federal regulation we require that requests to inspect or copy your protected health information be submitted in writing. You may obtain a form to request access to your records by contacting our medical records department. Your request will be reviewed and will generally be approved unless there are legal or medial reasons to deny the request.

Complaints. If you would like to submit a complaint (or comment) about our privacy practices, or you believe that your privacy rights have been violated, please contact us by sending a letter outlining your concerns to :

Lawana J. Coleman, RDCS

Privacy Officer and Operations Manager

Berkeley Cardiovascular Medical Group

3300 Webster Street, Ste. 410

Oakland, California 94609

510-549-4220

You will not be penalize or otherwise retaliated against for filing a complaint.

This policy is effective on or after April 14, 2003

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