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NOTICE OF PRIVACY PRACTICES

**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.**

Health Care Information—Protecting Your Privacy

It is your right as a patient to be informed of the privacy practices of your health care provider as well as to be informed of your privacy rights with respect to your personal health information. This Notice of Privacy Practices is intended to provide you with this information.

BridgePoint Health LLC (BPH) together with its Independently Contracted Providers Responsibilities

It is your right as a patient to be informed of BridgePoint Health's legal duties with respect to protection of the privacy of your personal health information.

BPH is required to:

- * Maintain the privacy of your health information;
- * Provide you with a notice of the legal duties and privacy practices regarding protected health information collected and maintained about you;
- * Abide by the terms of this notice

BPH reserves the right to change the terms of the notice of privacy practices and make the new notice provisions effective for all protected health information that it maintains. BPH also reserves the right to change the terms of its notice with respect to any applicable more limited uses or disclosures.

BPH will promptly revise and distribute its notice whenever BPH makes a substantial change to any of its privacy practices. BPH will not use or disclose your health information without your authorization, except as described in this notice.

Your Health Information Rights

You have the right to:

Request a restraint on certain uses and disclosures of your health information. You have the right to request restrictions on certain uses and disclosures of protected health information, even if the restriction affects your treatment or BPH payment or health care operation activities. You may also restrict the health care information provided to family or friends involved in your care or payment of your medical bills. However, BPH is not required to agree to your requested restrictions.

Obtain a paper copy of the notice upon request.

You have the right to obtain a paper copy of this notice upon request, even if you or representative have already received a copy.

Receive Confidential Communications.

You have the right to request that BPH communicates your health information to you by alternative means or at alternative locations. BPH shall accommodate reasonable requests. For example, you may request to be contacted at a phone number that is different from the phone number listed in your health care record.

Inspect and obtain a copy of your health record.

You have the right to inspect and obtain a copy of your health care record. This request for access to your health care record must be submitted in writing to the Compliance Office. This right may not apply to certain types of psychotherapy notes and BPH may charge you a reasonable fee for a copy of your health care record.

Amend your health record.

You have the right to request an amendment to your health care record if you believe your health information is incorrect or incomplete. You may be asked to make this request in writing and state the reason why your health record should be changed. If BPH did not create the health information you believe incorrect or if BPH disagrees with you, BPH may deny your request.

Obtain an accounting of disclosures of your health information.

You have the right to an accounting of disclosures of your health information that BPH has made in compliance with state and federal law. The accounting will describe the dates of each disclosure, a brief description of information disclosed and the reason for disclosure. You will receive one accounting per year at no charge. BPH may charge you a reasonable fee for each subsequent request. BPH will not include in the accounting disclosures made to you, or for purposes of payment, healthcare operations, national security, and certain health oversight activities.

Uses and Disclosures for Treatment, Payment, and Health Care Operations

BPH is permitted by the federal privacy rule to use or disclose your protected health information for treatment, payment, or health care operations.

BPH may use or disclose your health information for treatment.

BPH may use or disclose your health information in the provision, coordination or management of your health care. Example: BPH may use your health information to provide you with an appointment reminder

BPH may use or disclose your health information for payment.

BPH may use or disclose your health information to obtain reimbursement for the provision of health care services. The bill may include information that identifies you, your diagnosis and your treatment. Example: BPH may use or disclose your information to your insurer to obtain payment for the provision of health care services.

BPH may use or disclose your health information for routine health care operations.

BPH may use or disclose your health information for evaluation of patient care services, evaluating the performance of health care providers, activities relating to compliance with the law and business planning and development. The covered entities participating in BPH will share protected health information with each other, as necessary to carry out treatment, payment, or health care operations relating to BPH.

Uses or Disclosures of Your Protected Health Information Permitted Without Your Authorization

Without your written authorization, BPH may use or disclose your health information for the following purposes:

As Required by Law: BPH may use or disclose protected health information to the extent that the use or disclosure complies with and is limited to the relevant requirements of the law. Uses or disclosures required by federal privacy rule and limited by the more protective requirements of state law include the following:

- * Disclosures about victims of elderly or child abuse;
- * Disclosures for judicial and administrative proceedings;
- * Disclosure for law enforcement purposes.

Public Health: As required by law, BPH may disclose your protected health information to the State of Wisconsin for the purposes of statutory reporting.

BPH may disclose your protected health information to a state or federal public health agency for the purpose of preventing or controlling disease, injury, or disability. BPH may disclose your protected health information related to the jurisdiction of the Food and Drug Administration (FDA). Example: disease, injury, birth/death information.

BPH may disclose your protected health information that is reasonably related to a work related illness or injury if an application for workers' compensation has been filed.

Health oversight activities: BPH may disclose your health information to authorities for audit, investigation, inspection, licensure, disciplinary or other purposes related to oversight of the health care system or government benefit programs.

Law Enforcement: BPH may disclose your protected health information to county law enforcement officials for the reporting and investigation of elderly and/or child abuse. BPH may disclose your protected health information to a law enforcement official in response to a court order. If you are involved with the military, national security, or intelligence activities or you are in the custody of law enforcement officials or an inmate in a correctional institution, BPH may disclose your health information to the proper authorities so they may carry out their duties under the law.

For activities related to death: BPH may disclose your health information to coroners, medical examiners and funeral directors so they can carry out their duties related to your death, such as, identifying the body, determining the cause of death, or in the case of funeral directors, to carry out funeral preparation activities.

Research: BPH may use or disclose your protected health information for research purposes if the researcher has obtained your permission or fulfilled the stringent privacy requirements of state and federal law.

To avoid a serious threat to health or safety:

BPH may use or disclose your protected health information to the proper authorities to prevent or minimize serious and imminent threat to your or the public's health or safety.

BridgePoint Health LLC together with its Independently Contracted Providers has attempted to explain with this notice the circumstances where state law may be more protective than the federal privacy rule and provides greater privacy protection. Except for the situations listed above and treatment, payment or health care operation purposes, the use or disclosure of your health information requires BPH to obtain your written authorization. You may withdraw your authorization in writing at any time by submitting your written withdrawal to BPH Compliance Officer or the appropriate covered entity of BPH.

Patient Complaint Process

If you believe your privacy rights have been violated, you may file a complaint with BPH or with the Federal Department of Health and Human Services (Office of Civil Rights). There will be no retaliation against you for filing a complaint.

To file a complaint with BPH please contact the BPH Compliance Officer who will provide you with the necessary assistance.

Questions or Concerns

If you have any questions or concerns regarding your rights or the information in this notice, please contact:

Compliance Officer
BridgePoint Health LLC
3425 Superior Avenue
PO Box 387
Sheboygan, WI 53082-0387
Phone #920-458-5557

Effective Date: This Notice of Privacy Practice is effective as of April 14, 2003.