CORD BLOOD BANK OF ARKANSAS (CBBA)

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.

This Notice of Privacy Practices is provided to you as a requirement of the Health Insurance Portability and Accountability Act (HIPAA). It describes how we may use or disclose your protected health information, with whom that information may be shared, and the safeguards we have in place to protect it. This notice also describes your rights to access and amend your protected health information. You have the right to approve or refuse the release of specific information outside of our system except when law or regulation requires the release. Please review the following information carefully. If you have any questions about what is stated here you may contact the CBBA Privacy Officer at 501-686-7008.

Our Pledge Regarding Medical Information

At CBBA we understand that you have shown a great deal of trust by choosing to donate or store your baby's umbilical cord blood with us. We have never taken that trust lightly and have always treated all patient information as private and confidential. Our policies have been evaluated to ensure they comply with all aspects of the Federal regulations as well as all applicable State standards.

All privacy practices defined in this notice are applied to all individuals whose personal health information we may have access to. This includes parents who choose to store or donate their baby's cord blood, the baby whose cord blood has been sent to CBBA, potential recipients of our products and transplant candidates who may be referred to us by registry organizations.

We are required by law to:

- make sure that all personally identifiable health information is kept private
- provide you with this notice of our legal duties and our privacy practices in regards to your personal health information
- follow the terms of the notice that is currently in effect

How We May Use or Disclose Your Protected Health Information

There are three categories of permitted uses or disclosures of personal health information: Treatment, Payment and Healthcare Operations. In addition, we may use or disclose your protected health information if law or regulation requires the use or the disclosure.

We may use medical information about you to provide you with medical treatment or services. In the course of performing testing required to process the cord blood, a sample of the blood from the mother is tested for infectious diseases. According to our protocol, when we obtain positive results for some of those diseases those results are reported to the mother's physician to follow up with possible treatment.

It is permissible to use protected health information to obtain payment for your health care services. This is frequently required when payment is being sought from an insurance company or another third party. In most cases CBBA deals directly with the client in order to receive payment. However, if a procedure were covered by insurance it would be acceptable practice to give the insurer information about procedures you received so that the health plan could reimburse for the services.

Protected health information may also be used in the course of routine healthcare operations. These uses and disclosures are necessary to run the facility, to interact with the affiliated programs that initiate some of the cord blood donations, and to evaluate operations for quality assurance and performance improvement.

- We may use your personally identifiable information to contact you if needed to complete your records to render the cord blood unit available to release for transplant.

CBBA may report test results for infectious disease, for blood type and for HLA antigens to agencies and healthcare facilities that would be the end users of the cord blood, such as transplant centers. All personal identification is removed from such information before it is transmitted. The test results and factors relating to family health history are connected only to the unique identifier of the cord blood unit and not to the source donor of the cord blood. This strict barrier between donor and cord blood unit information is built into the structure of the computer systems in use at CBBA. All staff members are trained to observe this barrier in all operations.

- We may disclose your protected health information to researchers when their research has been approved by an institutional review board that has established protocols to ensure the privacy and confidentiality of your medical information. Any and all personal identification is removed before such information is disclosed.
- Your medical information may also be used to evaluate and improve the processes used in procurement of donations

We will disclose your protected health information if federal, state or local law or regulation requires the use or disclosure. We may also disclose such information in response to a court order or valid subpoena.

Other uses or disclosures of your protected health information can only be made with your express written authorization. CBBA does not use or disclose medical information for any purposes other than those described above and specifically allowed by statute. Therefore we are not obtaining any additional written authorization at this time.

Your Rights Regarding Medical Information About You

You have the right to inspect and copy medical information that may be used to make decisions about your care.

You have a right to request an amendment to your health information if you believe the information that we have is incorrect or incomplete.

You have a right to an accounting of disclosures we have made of your medical information for any purposes other than treatment, payment and healthcare operations as described in the section above.

You have a right to request restrictions or limitations to the medical information we may disclose. Your request must be made in writing to the CBBA Privacy Officer and state what information you want restricted, to whom the restriction should apply and when the restriction will expire. We are not required by law to agree with the restriction.

You have the right to request confidential communications by a particular means or to an alternate location.

You have a right to obtain a paper copy of this disclosure. You may request it from us at 1-501-686-6271.

Changes to this Notice

We reserve the right to make changes to this notice. We will post a copy of the revised notice as well as make it available on our website.

Complaints

If you believe your rights have been violated you may file a complaint with the Secretary of the Department of Health and Human Services. All complaints must be submitted in writing. To file a complaint with CBBA contact the Privacy Officer by mail or phone. Write to: The Cord Blood Bank of Arkansas, University of Arkansas for Medical Sciences, 4301 W. Markham St. Slot # 503-1, Little Rock, AR 72205.

You will not be penalized for filing a complaint.