Privacy Practices Concerning Personal Health Information

Date of Last Revision: January 15, 2015

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. THE PRIVACY OF YOUR PERSONAL HEALTH INFORMATION IS IMPORTANT TO US.

THIS NOTICE IS ONLY APPLICABLE TO YOU IF YOU SUPPLY PERSONAL HEALTH INFORMATION TO MYCARDIO LLC dba SLEEPIMAGE (“MyCardio”). FOR MYCARDIO’S GENERAL PRIVACY POLICY AND FOR MYCARDIO’S TERMS OF USE AGREEMENT, GO TO www.sleepimage.com. THESE DOCUMENTS ALSO GOVERN YOUR RIGHTS AND OBLIGATIONS WITH RESPECT TO MYCARDIO’S PRODUCTS, SERVICES AND WEBSITE USE, INCLUDING PERSONAL HEALTH INFORMATION AND SHOULD BE REVIEWED CAREFULLY.

If you suspect improper use of or access to your personal health information supplied to us, or if you have any other concerns or questions about this policy, please notify MyCardio via the “Contact Us” page of the Website or email support@sleepimage.com.

We are required by applicable federal and state law to maintain the privacy of your personal health information. We also are required to give you this Notice about our privacy practices, our legal duties and your rights concerning your personal health information. We must follow the privacy practices that are described in this Notice while it is in effect. This notice took effect on the date indicated above, and will stay in effect until it is updated or changed.

We reserve the right to change our privacy practices and the terms of this Notice at any time, provided such changes are permitted by applicable law. We reserve the right to make such changes effective for all personal health information that we maintain, including personal health information we created or received before we made the changes. Before we make a significant change in our privacy practices, we will change this Notice, post it within 60 days, and make the new Notice available upon request. For more information about our privacy practices or additional copies of this Notice, please contact us.

Your personal health information

Each user generates personal health information. For example, when you visit a doctor, a record of your visit is made. This record may have details about your symptoms, injury or illness, exam, medications, treatment, test results, and more. Information about you and the services that you received is called your personal health information.

In today’s healthcare system, this information is used in a number of ways. For example, it may be used to plan or coordinate your care. As such, it may be shared among your healthcare providers. It also may be used to process claims, pay for your healthcare services, or review services.

Your Rights

You have certain rights that pertain to your personal health information supplied to us, including the right to:

- Request and receive a copy of this Notice at any time.
- View or request a copy of your personal health information on record with us.
- Ask for added limits on permitted uses of your personal health information. There may be reasons we cannot agree to this request. If we agree to your request, we will keep our agreement except when necessary for your treatment in a medical emergency or disaster.
- Request and receive a list of third parties we have disclosed your information to for certain, permitted reasons described in this Notice in the past two years. If you request this information more than once in a 12-month period, we may charge you a reasonable cost-based fee for responding to these additional requests.
- Ask that your personal health information be sent by reasonable means other than mail or be sent to a different address to avoid putting your life in danger (you must make your request in writing). Your request must specify the alternative means or location, and provide satisfactory explanation how payments will be handled under the alternative means or location you request.
- Request to change or add to your personal health information (your request must be in writing, and it must explain why the information should be amended). We may deny your request if we did not create the information or for certain other reasons. If we deny your request, we will explain why in writing. If you do not agree with our denial, you may send us a written statement of disagreement that will be added to your record.
Our Duties
We shall:

- Protect the privacy of your personal health information.
- Give you a notice of our privacy practices.
- Follow the terms of this privacy notice.
- Fulfill your request to send information by other means or to another address to avoid putting your life in danger. Your request must be reasonable and must state the other address or the means you wish us to use. The alternate address or means must allow us to collect fees under the Terms of Use Agreement.
- Use and share only the personal health information needed to do our jobs.
- Make sure our business partners agree to protect your personal health information at least to the extent required by law. We will not use or share your personal health information except as required by law or described in this Notice.
- Notify you in the event that your personal health information is unlawfully breached.

Your Duties
The protection of your information is a shared responsibility of MyCardio and each user. MyCardio relies on users also taking steps to protect the secrecy and privacy of their information, including all passwords and user credentials used to access the SleepImage’s web-enabled interactive platform or any data regarding sleep stored locally on a device or computer.

How Personal Health Information is used
In today’s healthcare system, there are three key areas where we need to use your personal health information. We may use it for treatment, payment and other healthcare operations. We also may contract with other parties to do the work for us, as long as they promise to protect your information at least to the extent required by law. Each area is described below.

Treatment: This includes services needed to provide, coordinate or manage your healthcare. For example, we may perform certain functions or activities on behalf of, or provide certain services to, healthcare providers that involve the use or disclosure of individually identifiable health information. We may need to share personal health information with your doctor or other healthcare providers for treatment reasons.

Payment: We may need to use your personal health information in connection with managing payment obligations between us and healthcare providers and other business associates who provide treatment or services to you. We also may need to contact you with respect to dues or other payment obligations between you and us.

Healthcare Operations: This may include our quality review and improvement activities, resolving complaints and appeals, managing our business and other operations. We also may use your information to send you communications to describe a health-related product or service. This may include information on healthcare providers or business associates, new health-related products or services, or recommended treatments, healthcare providers, or settings of care that may be of interest to you. We may also use the information on a de-identified and aggregated basis to improve our offerings and the healthcare of others.

Other Uses of the Information
There may be a time when the use of your personal health information is needed because it benefits you, serves the public interest, or is required by law. In these cases, we will use and share only the personal health information needed or as required by law. Please read all of these other uses carefully.

With Your Written Permission: You may give us written permission to use your information or share it with someone you name for any purpose. You may withdraw your permission in writing at any time. We will honor your request unless the timing is such that the information has already been shared.

During an Emergency or Disaster: During a medical emergency or disaster, if it is believed that disclosure of the information would be in your best interest, then we may disclose it. This would be done to make sure you have access to the services you need or to process payment for those services.

To Report to Authorities: We may need to share personal health information if we suspect abuse, neglect or domestic violence. As required by law, we may need to make a report to the authorities.

For Research Purposes: We may use or share information with researchers and your identifiable personal health information is kept private.

To Comply with the Privacy Law: We may use or share information as required by the privacy law. For example, to see if we are complying with the law, the U.S. Department of Health and Human Services may review our practices and ask us for some personal health information.

For Workers’ Compensation: We may disclose information to comply with laws on workers’ compensation or other similar programs. For Public Health: We may share your personal health information with public health or legal authorities who work to prevent or control disease, injury or disability in the community. For example, we may share information about problems related to food, drugs, supplements and product defects with the U.S. Food and Drug Administration (FDA).

For Health Oversight: We may share information with authorities for activities to prevent fraud and abuse, audits, investigations, inspections, licenses and other government activities to monitor healthcare.

For Judicial and Administrative Proceedings: We may share your information in response to a court or administrative order, subpoena or other lawful process, under certain circumstances.
For Law Enforcement Purposes: Under limited circumstances, such as a court order, warrant or grand jury subpoena, we may disclose your information to law enforcement officials.

For Military or National Security Purposes: Under certain conditions, we may share the personal health information of armed forces staff with military authorities. We also may share your information with federal officials for intelligence, counterintelligence and other national security activities.

For More Information or to Report a Problem
If you have questions or would like more information on our privacy practices, you may contact us using the information at the end of this Notice. If you believe your privacy rights have been violated, you may file a complaint with us using the contact information at the end of this Notice. You also may send a written complaint to the U.S. Department of Health and Human Services. If you choose to file a complaint, you have our assurance we will not retaliate in any way.

Thank you for taking the time to review this Notice of Privacy Practices Concerning Personal Health Information. We work to protect your personal health information and we take our duties seriously.

Send MyCardio correspondence to:
MyCardio, Director of Quality Assurance, 370 Interlocken Blvd. Suite 650 Broomfield, CO 80021 USA or support@sleepimage.com
Send U.S. Department of Health and Human Services correspondence to:
U.S. Department of Health and Human Services 200 Independence Ave., S.W. Washington, D.C. 20201
P: 1 (877) 696-6775

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