

PATIENT EDUCATION

Notice of Privacy Practices

At the Cancer and Blood Specialty Clinic, safeguarding your privacy and confidentiality is fundamental to our commitment to providing exceptional healthcare. This Notice of Privacy Practices describes how medical information about you may be used and disclosed and how you can access this information. We encourage you to review it carefully.

How Your Medical Information May Be Used and Disclosed:

Your medical information may be used and disclosed for purposes such as treatment, payment, and healthcare operations. Additionally, we may use and disclose your information for purposes permitted or required by law, such as public health activities and legal proceedings.

Your Rights Regarding Your Medical Information:

You have the right to:

- Obtain an electronic or paper copy of your medical record
- Correct your health and claims if you believe they are inaccurate or incomplete
- Request confidential communication of your medical information
- Ask us to limit the information we share
- Receive the list of those with whom we've shared your information
- Obtain a copy of this Notice of Privacy Practices
- Designate someone to act on your behalf regarding your privacy rights
- File a complaint if you believe your privacy rights have been violated

Requesting Your Medical Records

To obtain a copy of your medical records, simply fill out a Medical Records Request Form attached to this packet. Once submitted, your treating physician will review and approve the request. This step ensures that any sensitive or confidential information is appropriately reviewed and released in accordance with applicable laws and regulations. Once your request and physician approval are received, we will process your request promptly. Please note that processing times may vary depending on the volume of requests and the complexity of your medical records. Records will be received in a paper format and can be picked up at our clinic. A nominal fee may apply for the processing and duplication of your medical records. Our staff will inform you of any applicable fees prior to processing your request.

Questions and Concerns

If you have any questions or concerns about how your medical information is used or disclosed, please don't hesitate to ask our staff. Your privacy is important to us, and we are here to address any inquiries you may have.

Filing and Complaint

If you believe your privacy rights have been violated, you have the right to file a complaint with our Human Resources and Compliance Specialist, Alison Le. Please direct your complaints to:

Alison Le
HR and Compliance Specialist
3851 Katella Ave Suite #125
Los Alamitos, CA, 90720
Tel: (562) 353-1184
Email: ale@cbsclinic.com

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Financial Fees and Responsibilities

At Cancer and Blood Specialty Clinic we believe in transparent communication regarding financial responsibilities to ensure a smooth and stress-free healthcare experience for our patients. Please take a moment to review the following information regarding financial fees and responsibilities.

Patient Financial Responsibility

When you elect to participate in our healthcare services, you assume a financial responsibility for the fees associated with your care. While we strive to provide comprehensive billing services, it's important to understand that you are ultimately responsible for ensuring payment in full of your fees.

Insurance Billing

As a courtesy, we will verify your coverage and bill your insurance carrier on your behalf. However, please note that any fees not covered by your insurance, including copayments, deductibles, and coinsurance are your responsibility. If your insurance claim denies any part of the claim or if continued therapy is elected past the approved period, you will be responsible for the account balance in full.

Understanding Our Financial Policies

We consider understanding our financial policies as an integral part of your care and treatment. Our aim is to provide you with the best possible care and service, and clarity regarding financial obligations is an essential aspect of this commitment.

Additional Fees

Please be aware of the following fees that are instituted and are not billable to insurance. Payment will be required prior to your next scheduled visit.

Missed Appointments (No Show Without Notice)	\$25.00
Dictated Physician Letter	\$25.00
Forms – EDD, FMLA	\$25.00
DMV, Jury Duty	\$20.00
Short Notice Cancellations (Less Than 24 Hours)	\$25.00
Non-Sufficient Funds Check	\$40.00

These fees are charged because insurance generally covers medical services aimed at diagnosing, treating, or preventing illness/injury. However, completed forms and associated fees are administrative rather than medical in nature. Insurance typically does not reimburse for these services because they are not considered medically necessary.

Payment Requirements

Copayments, coinsurance, and deductibles are to be paid prior to services being performed. This ensures timely and efficient processing of your appointment and billing.

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Patient Rights and Responsibilities

To ensure the finest care possible, all of Cancer and Blood Specialty Clinic patients are entitled to the following:

Patient Rights

- To select those who provide you with clinic and prescription services
- To receive the appropriate or prescribed services in a professional manner without discrimination relative to your age, sex, race, religion, ethnic origin, sexual preference or physical or mental handicap
- To be treated with friendliness, courtesy and respect by each and every individual representing our organization, who provided treatment or services for you and be free from neglect or abuse, be it physical or mental
- To assist in the development and preparation of your plan of care that is designed to satisfy, as best as possible, your current needs, including management of pain
- To be provided with adequate information from which you can give your informed consent for commencement of services, the continuation of services, the transfer of services to another health care provider, or the termination of services
- To express concerns, grievances, or recommend modifications to your clinic and dispensary services, without fear of discrimination or reprisal and to have grievance followed up by staff
- To request and receive complete and up-to-date information relative to your condition, treatment, alternative treatments, risk of treatment or care plans
- To receive treatment and services within the scope of your plan of care, promptly and professionally, while being fully informed as to our clinic's policies, procedures and charges
- To request and receive information regarding treatment, scope of services, or costs thereof, privately and with confidentiality
- To be given information as it relates to the uses and disclosure of your plan of care
- To have your plan of care remain private and confidential, except as required and permitted by law
- To receive instructions on handling drug recall
- To confidentiality and privacy of all information contained in the client/patient record and of Protected Health Information
- To receive information on how to access support from consumer advocates groups
- To receive clinic and prescription services health and safety information to include consumers' rights and responsibilities
- To identify the staff member of the clinic and their job title, and to speak with a supervisor of the staff member if requested
- To decline participation, refuse treatment and have consequences explained, revoke consent or dis-enroll at any point in time

Patient Responsibilities

- To provide accurate and complete information regarding your past and present medical history
- To give accurate clinical and contact information and to notify the clinic of changes in this information
- To agree to a schedule of services and report any cancellation of scheduled appointments and/or treatments
- To participate in the development and updating of a plan of care
- To communicate whether you clearly comprehend the course of treatment and plan of care
- To comply with the plan of care and clinical instructions
- To accept responsibility for your actions, if refusing treatment or not complying with, the prescribed treatment and services
- To notify your physician, clinic, and prescription services with any potential side effects and/or complications
- To notify CBSC via telephone or in person when medication supply is running low so refill may be completed for you promptly
- To submit any forms that are necessary to participate in the organization to the extent required by law
- To respect the rights of clinic personnel

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No Show Policy

At the Cancer and Blood Specialty Clinic, we understand that unexpected circumstances may arise that prevent patients from attending scheduled appointments. However, missed appointments can disrupt our scheduling and prevent other patients from receiving timely care. Therefore, we have implemented the following no-show policy:

1. Patients are expected to arrive on time for scheduled appointments. If unable to attend, we require at least 24 hours' notice to cancel and reschedule appointments.
2. Failure to provide timely notice of cancellation or failure to attend a scheduled appointment without prior notification may be considered a no-show.
3. A patient who accumulated a no-show will be subject to a \$25 fee, which will be billed to their account.
4. Patients who anticipate difficulty attending scheduled appointments are encouraged to contact our clinic as soon as possible to discuss alternative options or rescheduling.

Termination Policy

At the Cancer and Blood Specialty Clinic, we strive to maintain a positive and productive patient-provider relationship. However, in certain circumstances, it may become necessary to terminate our professional relationship with a patient. This decision may be made if:

1. The patient engaged in behavior that is disruptive, abusive, or threatening to staff and other patients.
2. There is a threat of legal action against CBSC physicians and employees.
3. The patient fails to comply with physician's order regarding their care, preventing the physician from providing adequate medical care.
4. An individual fails to show for their first appointment without notification or rescheduling.
5. A patient chronically fails to show for appointments, preventing other patients from receiving timely care.
6. The patient engages in misuse or abuse of prescriptions and medications.
7. The physician determines that he or she cannot provide continued, effective care.

In the event of termination, the patient will be notified in writing and provided with information regarding the reason for termination, any outstanding obligations or referrals, and options for seeking alternative care.

Every effort will be made to provide ongoing health care to all patients at CBSC. This medical practice does not discriminate in providing care to a patient due to race, color, sex, religion, national origin, age, handicap, or any other factors prohibited by law.

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Emergency Preparedness

In case of a medical emergency at home, your safety is paramount. If you or someone else experiences a life-threatening situation, such as difficulty breathing, chest pain, severe bleeding, or loss of consciousness, please dial 911 immediately for emergency medical assistance. While awaiting help, provide any necessary first aid to the best of your ability and ensure the safety of the individual until paramedics arrive. Remain calm and follow the instructions provided by the 911 dispatcher. Your quick action can make a significant difference in the outcome of the emergency.

Additionally, we encourage you to follow up with our clinic after any emergency situation or if you have any concerns about your health. CBSC is here to support you every step of the way, ensuring you receive the care and assistance you need during your journey with us.

In the event of an emergency related to your medication or if you need to contact our prescription services after hours, our on-call physician can be contacted by calling the prescription services number, (562) 725-4368, and pressing 2. Our dedicated team is available to assist you 24/7, ensuring that you have access to medical support whenever you need it. We understand the importance of timely communication regarding medication, and our on-call physician is ready to address any concerns or emergencies that may arise.

Medication Disposal

Proper disposal of medication is crucial for both environmental and safety reasons. We encourage all patients to dispose of unused or expired medications properly. Here are some dos and don'ts for medication disposal:

DO:

1. **Use Medication Take-Back Programs:** Many pharmacies, healthcare facilities, and law enforcement agencies offer medication take-back programs. These programs allow you to safely dispose of unused or expired medications at designated drop-off locations.
2. **Follow Disposal Instructions:** Some medications come with specific disposal instructions provided by the dispensing physician. Follow these instructions carefully to ensure proper disposal.
3. **Remove Personal Information:** Before disposing of medication packaging, be sure to remove any personal information to protect your privacy.

DON'T:

1. **Flush Medications Down the Toilet:** Flushing medications down the toilet can contaminate water sources and harm aquatic life. Avoid flushing medications unless specifically instructed to do so by disposal instructions or take-back programs.
2. **Throw Medications in the Trash Whole:** Simply throwing medications in the trash can pose a risk of accidental ingestion, especially for children or pets.
3. **Share Medications:** Never share prescription medications with others, even if they have similar symptoms or conditions. Each medication is prescribed based on individual needs and health factors.

KEEP FOR YOUR RECORDS