

Challenge Industries, Inc.

Notice of Privacy Practices

(Notice to Staff)

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.

Challenge Industries, Inc. ("Challenge") is required by law to maintain the privacy of your health information and to provide you with notice of its legal duties and privacy practices with respect to your health information. If you have questions about any part of this notice or if you want more information about the privacy practices at Challenge please contact:

Privacy Officer: Martine Gold
Challenge Industries, Inc.
950 Danby Rd. Suite 179
Ithaca, New York 14850
607-272-8990

I. How Challenge May Use or Disclose Your Health Information

Challenge collects health information from you and from other organizations which participate in your services, and stores this health information in paper files and in computer files. This health information includes information about any medical or other conditions which affect your ability to work. The paper and computer records are the property of Challenge, but the information in the medical record belongs to you. Challenge protects the privacy of your health information. The law permits Challenge to use or disclose your health information for the following purposes:

1. Treatment. Challenge sponsors various benefit plans which may use your personal health information, including, but not limited to, a health insurance plan, disability insurance, workers' compensation insurance, and a flexible benefits spending plan. Challenge may add, drop, or change its benefit plans in the future without affecting the validity of this notice.
2. Payment. Whenever Challenge pays for your health care services, it will use as much of your health information as is necessary to make such payment and to make sure that the payment is authorized and correct.
3. Regular Health Care Operations. Challenge may use your health care information in the administration of its benefit plans.
4. Information provided to you. At your request, Challenge will provide you with Protected Health Information that is in your file. Challenge may charge a nominal fee for photocopying.
5. Required by law. As required by law, we may use and disclose your health information.
6. Public health. As required by law, we may disclose your health information to public health authorities for purposes related to: preventing or controlling disease, injury or disability; reporting child abuse or neglect; reporting domestic violence; reporting to the Food and Drug Administration problems with products and reactions to medications; and reporting disease or infection exposure.

7. Judicial and administrative proceedings. We may disclose your health information in the course of any administrative or judicial proceeding.
8. Law enforcement. We may disclose your health information to a law enforcement official for purposes such as identifying or locating a suspect, fugitive, material witness or missing person, complying with a court order or subpoena and other law enforcement purposes.
9. Deceased person information. In the event of your death, we may disclose your health information to coroners, medical examiners and funeral directors.
10. Public safety. We may disclose your health information to appropriate persons in order to prevent or lessen a serious and imminent threat to the health or safety of a particular person or the general public.
11. Specialized government functions. We may disclose your health information for military, national security, and prisoner purposes.
12. Worker's compensation. We may disclose your health information as necessary to comply with worker's compensation laws.
13. Marketing. We may contact you to provide appointment reminders or to give you information about other programs or health-related benefits and services that may be of interest to you.
14. Change of Ownership. In the event that Challenge is merged with another organization, your health information/record will remain the property of the resulting organization.

II. When Challenge May Not Use or Disclose Your Health Information

Except as described in this Notice of Privacy Practices, Challenge will not use or disclose your health information without your written authorization. If you do authorize Challenge to use or disclose your health information for another purpose, you may revoke your authorization in writing at any time.

III. Your Health Information Rights

1. You have the right to request restrictions on certain uses and disclosures of your health information. Challenge is not required to agree to the restriction that you requested.
2. You have the right to receive your health information through a reasonable alternative means or at an alternative location. For instance, you may request that your information be sent to you in writing. Challenge may determine whether your request can reasonably be accommodated.
3. You have the right to inspect and copy your health information.
4. You have a right to request that Challenge amend your health information that is incorrect or incomplete. Challenge is not required to change your health information and will provide you with information about Challenge's denial and how you can disagree with the denial.
5. You have a right to receive an accounting of disclosures of your health information made by Challenge, except that Challenge does not have to account for the disclosures described in parts 1 (treatment), 2 (payment), 3 (health care operations), 4 (information provided to you), 5 (directory listings) and 16 (certain government functions) of section I of this Notice of Privacy Practices.

6. You have a right to a paper copy of this Notice of Privacy Practices.

If you would like to have a more detailed explanation of these rights or if you would like to exercise one or more of these rights, contact Challenge's Privacy Officer. Your employment specialist or vocational counselor can help you contact the Privacy Officer.

IV. Changes to this Notice of Privacy Practices

Challenge reserves the right to amend this Notice of Privacy Practices at any time in the future. Until such amendment is made, Challenge is required by law to comply with this Notice.

If Challenge revises this notice, it will explain the revisions to all participants covered by the Notice of Privacy Practices at the time of revision, and provide paper copies to all who desire one.

V. Complaints

Complaints about this Notice of Privacy Practices or how Challenge handles your health information should be directed to the Privacy Officer.

If you are not satisfied with the manner in which this office handles a complaint, you may submit a formal complaint to:

Department of Health and Human Services
Office of Civil Rights
Hubert H. Humphrey Bldg.
200 Independence Avenue, S.W.
Room 509F HHH Building
Washington, DC 20201

You may also address your complaint to one of the regional Offices for Civil Rights. A list of these offices can be found online at <http://www.hhs.gov/ocr/regmail.html>.