PRIVACY POLICY

Control Bionics' aim is to ensure that all of the regulations outlined by the Health Insurance Portability and Accountability Act (HIPAA) that apply to Control Bionics are followed by all employees.

Control Bionics understands the importance of privacy and is committed to maintaining the confidentiality of your protected health information (PHI). Control Bionics may collect, receive, and securely store clients' PHI. These records are used to ensure appropriate quality care and to obtain payment or funding assistance. Control Bionics is required by law to maintain the privacy of PHI, to provide individuals with notice of our legal duties and privacy practices with respect to PHI, and to notify affected individuals following a breach of unsecured PHI. This notice describes how we might use and disclose your health information. It also describes your rights and legal obligations with respect to your health information.

IF YOU HAVE ANY QUESTIONS ABOUT THIS NOTICE, PLEASE CONTACT CONTROL BIONICS AT (855) 831-7521.

We may use and disclose your health information in the following ways:

The following categories describe the ways in which we may use and disclose your PHI. If you do not authorize Control Bionics to use or disclose your PHI for these purposes, you may revoke your authorization in writing at any time.

- **Payment/Funding Assistance** – PHI is primarily used at Control Bionics to assist in getting funding assistance through Medicare, Medicaid, or private insurance for Speech Generating Devices (SGDs) or advanced augmentative communications (AAC) devices and solutions.
- **Referral to AAC Advocate** – Control Bionics may send PHI to AAC advocates as required to aid in alternate funding sources.
- **Required by Law** – As required by law, Control Bionics will use and disclose your health information, but we will limit our use or disclosure to the relevant requirements of the law.
- **Notification and Communication with Guardians, Caregivers, SLPs and Other Health Care Professionals** – Control Bionics may disclose your PHI to authorized individuals. This may include customers, relatives of customers, caregivers, SLPs, other medical professionals and various funding agencies including Medicare, Medicaid, and private insurance.
- **Law Enforcement** – Control Bionics may, and are sometimes required by law, to 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, warrant, grand jury subpoena, and with other law enforcement purposes.
- **Worker's Compensation** – Control Bionics may release your PHI for Workers' Compensation and similar programs.
- **Research** – Control Bionics may disclose your PHI to researchers when an institutional review board that has reviewed the research proposal and established protocols to ensure the privacy or de-identification of your PHI has approved their research.
- **Military** – Control Bionics may disclose your PHI if you are a member of the U.S. or foreign military forces (including Veterans) and if required by the appropriate military authorities.

Data Retention

Control Bionics retains your PHI and related records for as long as reasonably necessary to provide services to you, to obtain and document payment or funding assistance, and to comply with our legal, regulatory, tax, and accounting obligations. In general, Control Bionics retains PHI for a minimum of six (6) years from the date of creation or the date the information was last in effect, whichever is later, consistent with HIPAA record-retention requirements, unless a longer period is required by applicable state law, a funding source (such as Medicare or Medicaid), or an ongoing legal matter.

When PHI is no longer needed and any applicable retention period has expired, Control Bionics will securely destroy or permanently de-identify the information in accordance with HIPAA's disposal requirements.

Data Deletion Requests

You may request that Control Bionics delete PHI that we hold about you. To submit a deletion request, you must contact us in writing at the address below or call (855) 831-7521.

- **How to Request** – Submit a written request identifying the specific information you would like deleted, along with information sufficient for us to verify your identity and locate your records.
- **Limitations on Deletion** – Control Bionics may be unable to honor a deletion request, in whole or in part, where retention of the information is required by law, is necessary to complete a payment or funding determination already in process, is needed to defend against legal claims, or is otherwise necessary for purposes permitted under HIPAA, such as treatment, payment, or health care operations.
- **Our Response** – Control Bionics will respond to your deletion request within a reasonable time and will notify you in writing if we are unable to delete some or all of the requested information, along with the reason for the denial.
- **Effect of Deletion** – If information is deleted at your request, Control Bionics may not be able to continue providing certain services, including assistance obtaining funding or payment for your Speech Generating Device (SGD) or AAC device, to the extent that information was necessary for that purpose.

Organization Account Termination and Data Offboarding

If your organization holds an account or has entered into a contract or business associate agreement with Control Bionics, your organization may request termination of that account or contract and the offboarding or deletion of organizational data that Control Bionics maintains. This includes account records, contract and billing information, and other data associated with your organization, and is separate from individual requests to delete protected health information (PHI).

- **How to Request** – An authorized representative of your organization must submit a written request to Control Bionics identifying the account or contract to be terminated and the organizational data to be offboarded or deleted, along with information sufficient for us to verify the representative's authority to act on behalf of the organization.
- **Offboarding Process** – Upon termination, Control Bionics will work with your organization to return or securely transfer organizational data where requested and feasible, and to establish a timeline for offboarding. Unless otherwise agreed in writing, data will be returned or deleted in accordance with the terms of the applicable contract or business associate agreement.
- **Limitations on Deletion** – Control Bionics may retain certain organizational data after termination where retention is required by law, is necessary to complete a payment or funding determination already in process, is needed to defend against legal claims, or is otherwise required for legitimate business, tax, audit, or regulatory purposes. Any retained data will continue to be protected in accordance with this notice and applicable law.
- **Protected Health Information** – Termination of an organizational account or contract does not by itself delete individual PHI. PHI maintained by Control Bionics will be retained, returned, de-identified, or destroyed in accordance with the Data Retention and Data Deletion Requests sections above, the applicable business associate agreement, and HIPAA requirements.
- **Effect of Termination** – Following termination and offboarding, Control Bionics will discontinue the associated services. Your organization may no longer be able to access data or services that depended on the terminated account or contract.

YOUR PRIVATE HEALTH INFORMATION RIGHTS

Request Restrictions

You have the right to request restrictions on certain uses and disclosures of your PHI by written request specifying what information you want to limit, and what limitations on our use or disclosure of that information you wish to have imposed. If you tell Control Bionics not to disclose information to your commercial health plan concerning health care items or services for which you pay in full out-of-pocket, we will abide by your request, unless we must disclose the information for treatment or legal reasons. We reserve the right to accept or reject any other request, and will notify you of our decision. In order to request a restriction in our use or disclosure of your PHI, you must make your request in writing to:

Control Bionics
302 W. 3rd St. Suite 810
Cincinnati, OH 45202

Confidential Communication

You have the right to request that you receive your health information in a specific way or at a specific location.

Inspection and Copies

You have the right to inspect and obtain a copy of your PHI that may be used to make a decision about you, including: customer medical information, funding information, and billing records. You must submit a written request detailing what information you want access to and/or a copy of to Control Bionics. Control Bionics may deny your request to inspect and/or copy in certain limited circumstances.

Amend or Supplement

You have a right to request that Control Bionics amend your PHI that you believe to be incorrect or incomplete. You must make a request to amend in writing, and include the reasons you believe the information is inaccurate or incomplete. Control Bionics may deny your request if they do not have the information, if they did not create the information, if you are not permitted to inspect or copy the information at issue, or if the information is accurate and complete.

Request Deletion of Your PHI

You have the right to request that Control Bionics delete PHI we maintain about you, as described in the Data Deletion Requests section above. Requests must be submitted in writing to the address listed under Request Restrictions, above, or by calling (855) 831-7521. Control Bionics will evaluate each request and notify you in writing if any portion of your request cannot be honored, and why.

Organization Account Termination and Data Offboarding

If you are an authorized representative of an organization with an account, contract, or business associate agreement with Control Bionics, you have the right to request termination of that account or contract and the offboarding or deletion of your organization's data, as described in the Organization Account Termination and Data Offboarding section above. Requests must be submitted in writing to the address listed under Request Restrictions, above, or by calling (855) 831-7521. This right is separate from an individual's right to request deletion of their PHI, and Control Bionics will handle any PHI involved in accordance with the applicable business associate agreement and HIPAA requirements.

Data Retention Period

As described in the Data Retention section above, Control Bionics retains PHI for as long as reasonably necessary to provide services and meet legal, regulatory, and funding-related obligations, generally a minimum of six (6) years, after which the information is securely destroyed or de-identified in accordance with HIPAA requirements.