

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 THIS NOTICE CAREFULLY.

If you have questions about this Notice, please contact our Privacy Officer at 215-788-2700.

A. OUR COMMITMENT TO YOUR PRIVACY

Gentell is dedicated to maintaining the privacy of your health information. In conducting our business, we will create records regarding you and the treatment and services we provide to you. We are required by law to maintain the confidentiality of your health information and provide you with this Notice of our legal duties and privacy practices concerning your health information. By law, we must follow the terms of this Notice.

We reserve the right to revise or amend this Notice at any time. Any revision or amendment to this Notice will be effective for all of your records, including those we created or maintained before the change was made. Should we make changes to this Notice, the revised Notice will be available upon request and posted to our website. Gentell will also post a copy of our current Notice in our offices in a prominent location.

To summarize, this Notice provides you with the following important information:

- How we may use and disclose your health information
- Your rights to access and control your health information
- Our obligations concerning the use and disclosure of your health information.

B. WE MAY USE AND DISCLOSE YOUR HEALTH INFORMATION IN THE FOLLOWING WAYS

The following categories describe the different ways in which we may use and disclose your health information without asking for your authorization, and examples of those uses and disclosures. These examples are provided to give you an idea of what we mean and do not represent every circumstance where we may use or disclose health information about you. In addition, some of the uses and disclosures described below may be limited or restricted by state laws or other legal requirements not listed.

1. Treatment. Gentell may use your health information to treat you. For example, our employees may use or disclose your health information in order to provide you with health care items you have ordered from us. Additionally, we may disclose information about you to other medical professionals who assist in your care, such as your physician.

2. Payment. Gentell may use and disclose your health information in order to bill and collect payment for the services and items you may receive from us. For example, we may contact your health insurer to certify that you are eligible for benefits (and for what range of benefits), and we may provide your insurer with details regarding your treatment to determine if your insurer will cover, or pay for, your treatment. Also, we may use your health information to bill you directly for services and items.

3. Health Care Operations. Gentell may use and disclose your health information when necessary to operate our business. For example, Gentell may use your health information to evaluate the quality of care you received from us, or for licensing or accreditation purposes.

4. Appointment Reminders. Gentell may use and disclose your health information to contact you and remind you of visits/deliveries.

5. Health-Related Products and Treatment Alternatives. Gentell may use and disclose your health information to give you information about treatment alternatives, or health related products or services that may be of interest to you. For example, we may contact you to tell you about a new product line we have introduced.

6. Release of Information to Family/Friends Involved in Your Care. Gentell may release your health information to a friend or family member that has been involved in your health care, if you do not object. We will only release information that relates to that individual's involvement in your health care. We may also use or disclose your information to notify a family member or other person responsible for your care of your location and general condition. If you do not want information shared in this manner, please submit a written request for restriction, as described further below.

7. Disclosures Required By Law. Gentell will use and disclose your health information when we are required to do so by federal, state or local law. Any use or disclosure of your health information in this circumstance will be made in compliance with the law and limited only to the information required.

8. Business Associates. We will share your health information with third party vendors, or "business associates," that perform various activities for us (e.g. billing, legal services). Whenever we engage a business associate to perform activities that involve the use or disclosure of health information, we will have a written agreement with that business associate that contains terms requiring them to protect the privacy of your health information to the same extent we must.

C. USE AND DISCLOSURE OF YOUR IDENTIFIABLE HEALTH INFORMATION IN CERTAIN OTHER CIRCUMSTANCES

The following categories describe additional scenarios in which we may use or disclose your health information:

1. Public Health Activities. Gentell may disclose your health information to public health authorities that are authorized by law to collect information for the purpose of:

- Maintaining vital records, such as births and deaths
- Reporting child abuse or neglect
- Preventing or controlling disease, injury or disability
- Disease reporting
- Reporting reactions to drugs or problems with products or devices
- Notifying you if a product or device you may be using has been recalled
- Notifying appropriate authorities regarding the potential abuse or neglect of an adult patient (including domestic violence); however, we will only disclose this information if the patient agrees or we are required or authorized by law to disclose this information

2. Health Oversight Activities. Gentell may disclose your health information to a health oversight agency for activities authorized by law. Oversight activities can include, for example, investigations, inspections, audits, or activities necessary for the government to monitor government programs.

3. Lawsuits and Similar Proceedings. Gentell may use and disclose your health information in response to a court or administrative order. We also may disclose your health information in response to a discovery request, subpoena, or other lawful process, but only if we have made an effort to inform you of the request or to obtain an order protecting the information the party has requested.

4. Law Enforcement. We may disclose health information if asked to do so by a law enforcement official under certain circumstances. For example, we may disclose information in response to a warrant, summons, court order, subpoena or similar legal process. We may also disclose information to identify/locate a suspect, material witness, fugitive or missing person.

5. Public Safety. Gentell may use and disclose your health information when necessary to reduce or prevent a serious threat to the health and safety of an individual or the public. Under these circumstances, we will only make disclosures to a person or organization able to help prevent the threat.

6. Military. Gentell may disclose your health information if you are a member of the military if required by the appropriate military command authorities.

7. National Security. Gentell may disclose your health information to federal officials for intelligence and national security activities authorized by law. We also may disclose your health information to federal officials in order to protect the President, other officials or foreign heads of state.

8. Inmates. Gentell may disclose your health information to correctional institutions or law enforcement officials if you are an inmate or under the custody of a law enforcement official. Disclosure for these purposes would be necessary: (a) for the institution to provide health care services to you, (b) for the safety and security of the institution, and/or (c) to protect your health and safety or the health and safety of other individuals.

9. Workers' Compensation. Gentell may release your health information for workers' compensation and similar programs, as authorized by law.

10. Coroners, Medical Examiners and Funeral Directors. We may disclose your health information to a coroner or medical examiner. For example, this may be necessary to identify a deceased person or determine cause of death.

11. Authorization. Gentell will obtain your written authorization for any uses and disclosures that are not identified above in this Notice. We specifically will not sell your health information or use it for paid marketing purposes without your express authorization. If you provide us an authorization for the use and disclosure of your health information, you may revoke that authorization at any time in writing. If you revoke your authorization, we will not use or disclose your health information for the purposes permitted by the authorization, except to the extent we have already used or disclosed your health information in reliance on your authorization. Please note: we are required to retain records of your care.

D. YOUR RIGHTS REGARDING YOUR HEALTH INFORMATION

You have the rights described below regarding the health information that we maintain about you. You may exercise any of these rights by making a written request to our Privacy Officer. If you would like more information about these rights or to exercise any of them, please contact our Privacy Officer using the contact information at the end of this Notice.

1. Confidential Communications. You have the right to request that Gentell communicate with you about your health and related issues in a particular manner or at a certain location. For instance, you may ask that we contact you at home, rather than work. Gentell will accommodate reasonable requests. You do not need to give a reason for your request.

2. Requesting Restrictions. You have the right to request a restriction on our use or disclosure of your health information for treatment, payment or health care operations purposes. Additionally, you have the right to request that we limit our disclosure of your health information to individuals involved in your care or the payment for your care, such as family members and friends. Except as described below, we are not required to agree to your request. and, if we do agree, we may still use or disclose your health information when otherwise required by law, in emergencies, or when the information is necessary to treat to you. If you ask us to restrict disclosures of your health information to your health insurer for a particular item or service, we must agree to your request if you have paid us out of pocket in full for that item or service at the time the item or service is provided.

3. Inspection and Copies. You have the right to inspect and obtain a copy of the health information we maintain that may be used to make decisions about your care or payment for your care. You have a right to obtain an electronic copy of your health information if it is readily producible in that format. Gentell may charge a reasonable fee for the costs of copying, mailing, labor and supplies associated with your request. We may deny your request to inspect and/or obtain a copy of your health information in certain limited circumstances, however, we will notify you in writing of any such denial and you may request a review of our decision.

4. Amendment. You may ask us to amend your health information if you believe it is incorrect or incomplete by making a written request to our Privacy Officer. You must provide us with a reason that

supports your request for amendment. However, we may deny your request if you ask us to amend information that is: (a) accurate and complete; (b) not part of the identifiable health information kept by or for Gentell; (c) not part of the identifiable health information which you would be permitted to inspect and copy; or (d) not created by Gentell, unless the individual or entity that created the information is not available to amend the information.

5. Accounting of Disclosures. You have the right to request an accounting of the disclosures Gentell has made of your health information in the six (6) years prior to the date you request the accounting. This list of disclosure will not include disclosure we have made for treatment, payment, health care operations, or as specifically authorized by you. The first list you request within a 12 month period is free of charge, but we may charge you if you request additional lists within the same 12 month period. Gentell will notify you of the costs involved with additional requests, and you may withdraw your request before you incur any costs.

6. Right to a Paper Copy of This Notice. You are entitled to receive a paper copy of this Notice at any time. To obtain a paper copy of this Notice, contact our Privacy Officer.

7. Right to be Notified of a Breach of Your Health Information. In the event that we discover that there has been a breach of your unsecured health information, we are required to notify you of that breach.

8. Right to Exercise Rights and File a Complaint. To exercise any of the rights discussed above, please contact our Privacy Officer using the contact information provided below. If you believe your privacy rights have been violated, you may file a written complaint with Gentell by contacting our Privacy Officer:

Liz Jackson, Privacy Officer
2701 Bartram Road
Bristol, PA 19007
Phone: 215-788-2700
Email: privacyofficer@gentell.com

You may also file a written complaint with the Secretary of the Department of Health and Human Services:

U.S. Department of Health and Human Services
Office for Civil Rights
200 Independence Avenue, S.W.
Washington, D.C. 20201

You will not be penalized and we will not retaliate against you in any way for filing a complaint.

E. EFFECTIVE DATE OF THIS NOTICE

May 7, 2015