
Privacy Policy

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 IT CAREFULLY.

Teladoc's Commitment To Your Privacy

Teladoc is dedicated to maintaining the privacy of your protected health information ('PHI'). PHI is information about you that may be used to identify you (such as your name, social security number or address), and that relates to (a) your past, present or future physical or mental health or condition, (b) the provision of health care to you, or (c) your past, present, or future payment for the provision of health care. In conducting its business, Teladoc will receive and create records containing your PHI. Teladoc is required by law to maintain the privacy of your PHI and to provide you with notice of its legal duties and privacy practices with respect to your PHI.

Teladoc must abide by the terms of this Notice while it is in effect. This current Notice takes effect on May 22, 2009, and will remain in effect until Teladoc replaces it. Teladoc reserves the right to change the terms of this Notice at any time, as long as the changes are in compliance with applicable law. If Teladoc changes the terms of this Notice, the new terms will apply to all PHI that it maintains, including PHI that was created or received before such changes were made. If Teladoc changes this Notice, it will post the new Notice on its Web site and will make the new Notice available upon request.

Uses And Disclosures Of PHI

Teladoc may use and disclose your PHI in the following ways:

- 1. Treatment, Payment and Health Care Operations. Teladoc is permitted to use and disclose your PHI for purposes of (a) treatment, (b) payment and (c) health care operations. For example:**
 - **Treatment.** Teladoc may disclose your PHI to another physician or health care provider for purposes of a consult or in connection with the provision of follow-up treatment.
 - **Payment.** Teladoc may use and disclose your PHI to your health insurer or health plan in connection with the processing and payment of claims and other charges.
 - **Health Care Operations.** Teladoc may use and disclose your PHI in connection with its health care operations, such as providing customer services and conducting quality review assessments. Teladoc may engage third parties to provide various services for Teladoc. If any such third party must have access to your PHI in order to perform its services, Teladoc will require that third party to enter an agreement that binds the third party to the use and disclosure restrictions outlined in this Notice.

2. **Authorization.** Teladoc is permitted to use and disclose your PHI upon your written authorization, to the extent such use or disclosure is consistent with your authorization. You may revoke any such authorization at any time.
 3. **As Required by Law.** Teladoc may use and disclose your PHI to the extent required by law.
-

Special Circumstances

The following categories describe unique circumstances in which Teladoc may use or disclose your PHI:

1. **Public Health Activities.** Teladoc may disclose your PHI to public health authorities or other governmental authorities for purposes including preventing and controlling disease, reporting child abuse or neglect, reporting domestic violence and reporting to the Food and Drug Administration regarding the quality, safety and effectiveness of a regulated product or activity. Teladoc may, in certain circumstances disclose PHI to persons who have been exposed to a communicable disease or may otherwise be at risk of contracting or spreading a disease or condition.
2. **Workers' Compensation** Teladoc may disclose your PHI as authorized by, and to the extent necessary to comply with, workers' compensation programs and other similar programs relating to work-related illnesses or injuries.
3. **Health Oversight Activities.** Teladoc may disclose your PHI to a health oversight agency for authorized activities such as audits, investigations, inspections, licensing and disciplinary actions relating to the health care system or government benefit programs.
4. **Judicial and Administrative Proceedings.** Teladoc may disclose your PHI, in certain circumstances, as permitted by applicable law, in response to an order from a court or administrative agency, or in response to a subpoena or discovery request.
5. **Law Enforcement.** Teladoc may, under certain circumstances, disclose your PHI to a law enforcement official, such as for purposes of identifying or locating a suspect, fugitive, material witness or missing person.
6. **Decedents.** Teladoc may, under certain circumstances, disclose PHI to coroners, medical examiners and funeral directors for purposes such as identification, determining the cause of death and fulfilling duties relating to decedents.
7. **Organ Procurement.** Teladoc may, under certain circumstances, use or disclose PHI for the purposes of organ donation and transplantation.

8. **Research.** Teladoc may, under certain circumstances, use or disclose PHI that is necessary for research purposes.
 9. **Threat to Health or Safety.** Teladoc may, under certain circumstances, use or disclose PHI if necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public.
 10. **Specialized Government Functions.** Teladoc, may in certain situations, use and disclose PHI of persons who are, or were, in the Armed Forces for purposes such as ensuring proper execution of a military mission or determining entitlement to benefits. Teladoc may also disclose PHI to federal officials for intelligence and national security purposes.
-

Your Rights Regarding Your PHI

You have the following rights regarding the PHI maintained by Teladoc:

1. **Confidential Communication.** You have the right to receive confidential communications of your PHI. You may request that Teladoc communicate with you through alternate means or at an alternate location, and Teladoc will accommodate your reasonable requests. You must submit your request in writing to Teladoc.
2. **Restrictions.** You have the right to request restrictions on certain uses and disclosures of PHI for treatment, payment or health care operations. You also have the right to request that Teladoc restrict its disclosures of PHI to only certain individuals involved in your care or the payment of your care. You must submit your request in writing to Teladoc. Teladoc is not required to comply with your request. However, if Teladoc agrees to comply with your request, it will be bound by such agreement, except when otherwise required by law or in the event of an emergency.
3. **Inspection and Copies.** You have the right to inspect and copy your PHI. You must submit your request in writing to Teladoc. Teladoc may impose a fee for the costs of copying, mailing, labor and supplies associated with your request. Teladoc may deny your request to inspect and/or copy your PHI in certain limited circumstances. If that occurs, Teladoc will inform you of the reason for the denial, and you may request a review of the denial.
4. **Amendment.** You have a right to request that Teladoc amend your PHI if you believe it is incorrect or incomplete, and you may request an amendment for as long as the information is maintained by Teladoc. You must submit your request in writing to Teladoc and provide a reason to support the requested amendment. Teladoc may, under certain circumstances, deny your request by sending you a written notice of denial. If Teladoc denies your request, you will be permitted to submit a statement of disagreement for inclusion in your records.

- 5. Accounting of Disclosures.** You have a right to receive an accounting of all disclosures Teladoc has made of your PHI. However, that right does not include disclosures made for treatment, payment or health care operations, disclosures made to you about your treatment, disclosures made pursuant to an authorization, and certain other disclosures. You must submit your request in writing to Teladoc and you must specify the time period involved (which must be for a period of time less than six years from the date of the disclosure). Your first accounting will be free of charge. However, Teladoc may charge you for the costs involved in fulfilling any additional request made within a period of 12 months. Teladoc will inform you of such costs in advance, so that you may withdraw or modify your request to save costs.
- 6. Breach Notification.** You have the right to be notified in the event that Teladoc (or a Teladoc Business Associate) discovers a breach of unsecured PHI.
- 7. Paper Copy.** You have the right to obtain a paper copy of this Notice from Teladoc at any time upon request. To obtain a paper copy of this notice, please contact Teladoc by calling 1.800.Teladoc.
- 8. Complaint.** You may complain to Teladoc and to the Secretary of the Department of Health and Human Services if you believe that your privacy rights have been violated. To file a complaint with Teladoc, you must submit a statement in writing to Teladoc: Attn: Security Officer, 1945 Lakepointe Drive, Lewisville, TX 75057. Teladoc will not retaliate against you for filing a complaint.
- 9. Further Information.** If you would like more information about your privacy rights, please contact Teladoc by calling 1.800.Teladoc and ask to speak to the Privacy and Security Officer. To the extent you are required to send a written request to Teladoc to exercise any right described in this Notice, you must submit your request to Teladoc at: Attn: Security Officer, 1945 Lakepointe Drive, Lewisville, TX 75057.