

### **Our privacy commitment**

We are committed to respecting your privacy and recognizing your need for appropriate protection and management of personally identifiable information you share with us (the phrases 'personally identifiable information' or "personal information" mean any information by which you can be identified, such as your name, address, telephone number, etc.). The purpose of this privacy policy is to inform you what personally identifiable information or personal information we may collect from you when you visit our web site, how we use such information, and the choices you have regarding our use of, and your ability to review and correct, the information.

### **What information is collected?**

In general, you can visit many of our web pages without telling us who you are or revealing any personal information about yourself. For each visitor to our web page, our web server automatically recognizes only the consumer's domain name, but not the e-mail address (where possible). We may track the Internet domain address from which people visit us and analyze this data for trends and statistics, but individual users will remain anonymous, unless you voluntarily tell us who you are.

There may be times (such as when you purchase a gift card or elect to receive emails from us) at which we ask you to provide certain information about yourself such as your name, shipping/billing address, telephone number, email address, credit card information, birth date, gender, etc. We also maintain a record of your online purchases. Whether or not to provide such information is completely your own choice. But if you choose not to provide this information we request, you may be unable to purchase products, or access certain services, offers and content on our website.

### **Using information about you**

Your e-mail information is not shared with other organizations for commercial purposes. We do not collaborate with or have special relationships with any ad server companies. We use the personally identifiable information you provide for internal purposes, such as confirming and tracking your order, subscription or registration, analyzing trends and statistics, informing you of our new products, services and offers, and providing you with information from and about Haven. To serve you better, we may combine information you give us online and in our spa.

We do not share or sell your personal information, digital or otherwise. On rare occasions, we may contact you with an offer from a partner - like Eve Salon, our sister salon in the West Village. This contact will not compromise your privacy - your personal information in these cases has not been transferred to any other party.

We may contract with companies or persons to provide certain services including credit card processing, shipping, data management, promotional services, etc. We call them our Service Providers, which may be located in the United States or throughout the world. We provide our Service Providers with the information needed for them to perform these services. We also ask our service providers to confirm that their privacy practices are consistent with ours.

In the course of processing your information, it may be necessary to disclose or transfer your personal information to others in the event of the following circumstances: if Haven is merged with or acquired by another company; to comply with legal or regulatory requirements or obligations in accordance with applicable law or court order; or in case of emergency such as to safeguard the life, health, or property of an individual.

By providing your personal information to Haven, you authorize Haven to collect, process and use your personal information for lawful, Haven business related purposes; to store your personal information at and transmit it to various locations throughout the world, either directly or through our third party vendors, whether within your country of residence, the United States, or elsewhere.

### **Editing information about you**

If you prefer not to receive information from us, or wish to correct your information, please let us know by:

Email: [info@havensoho.com](mailto:info@havensoho.com)

Phone: 212-343-3515

Mail:  
Haven  
150 Mercer Street  
New York, NY 10012  
Attention: Customer Service

### **Security**

We always use industry-standard encryption technologies when transferring and receiving consumer data exchanged with our site. We have appropriate security measures in place in our physical facilities to protect against the loss, misuse or alteration of information that we have collected from you at our site.

Unfortunately, however, no data transmission over the Internet can be guaranteed to be 100% secure. As a result, while we strive to protect your personal information, we cannot guarantee or warrant the security of any information you transmit to or from our website, and you do so at your own risk. Once we receive your transmission, we will do our best to protect its security on our systems

### **Policy changes**

From time to time, we may use customer information for new, unanticipated uses not previously disclosed in our privacy notice. If our information practices change at some time in the future we will post the policy changes to our web site to notify you of these changes and provide you with the ability to opt out of these new uses. If you are concerned about how your information is used, you should check back at our web site periodically.

### **Your feedback**

To help us improve our privacy policy and practice, please give us your feedback.

Email: [info@havensoho.com](mailto:info@havensoho.com)

Phone: 212-343-3515

Mail:  
Haven  
150 Mercer Street  
New York, NY 10012  
Attention: Customer Service

## **HIPAA PRIVACY NOTICE**

*Effective April 14, 2003*

***This notice describes how medical information about you may be used and disclosed and how you can obtain access to this information. Please review it carefully.***

### **Introduction**

We are required by law to maintain the privacy of “protected health information.” “Protected health information” includes any identifiable information that we obtain from you or others that relates to your physical or mental health, the health care you have received, or payment for your health care.

As required by law, this notice provides you with information about your rights and our legal duties and privacy practices with respect to the privacy of protected health information. This notice also discusses the uses and disclosures we will make of your protected health information. We must comply with the provisions of this notice, although we reserve the right to change the terms of this notice from time to time and to make the revised notice effective for all protected health information we maintain. You can always request a copy of our most current privacy notice from our office.

### **Permitted Uses and Disclosures**

We can use or disclose your protected health information for purposes of treatment, payment and health care operations.

- ◆ Treatment means the provision, coordination or management of your health care, including consultations between health care providers regarding your care and referrals for health care from one health care provider to another. For example, a doctor treating you for a broken leg may need to know if you have diabetes because diabetes may slow the healing process. Therefore, the doctor may review your medical records to assess whether you have potentially complicating conditions like diabetes.
- ◆ Payment means activities we undertake to obtain reimbursement for the health care provided to you, including determinations of eligibility and coverage and other utilization review activities. For example, prior to providing health care services, we may need to provide to your insurance carrier (or other third party payor) information about your medical condition to determine whether the proposed course of treatment will be covered. When we subsequently bill the carrier or other third party payor for the services rendered to you, we can provide the carrier or other third party payor with information regarding your care if necessary to obtain payment.
- ◆ Health Care Operations mean the support functions of our practice related to treatment and payment, such as quality assurance activities, case management, receiving and responding to patient complaints, physician reviews, compliance programs, audits, business planning, development, management and administrative activities. For example, we may use your medical information to evaluate the performance of our staff in caring for you. We may also combine medical information about many patients to decide what services are not needed, and whether certain new treatments are effective.

### **Disclosures Related To Communications With You Or Your Family**

We may contact you to provide appointment reminders or information about treatment alternatives or other health-related benefits and services that may be of interest to you or relate specifically to your medical care through our office. For example, we may leave appointment reminders on your answering machine or with a family member or other person who may answer the telephone at the number that you have given us in order to contact you.

We may disclose your protected health information to your family or friends or any other individual identified by you when they are involved in your care or the payment for your care. We will only disclose the protected health information directly relevant to their involvement in your care or payment. We may also use or disclose your protected health information to notify, or assist in the notification of, a family member, a personal representative, or another person responsible for your care of your location, general condition or death. If you are available, we will give you an opportunity to object to these disclosures, and we will not make these disclosures if you object. If you are not available, we will determine whether a disclosure to your family or friends is in your best interest, and we will disclose only the protected health information that is directly relevant to their involvement in your care.

We will allow your family and friends to act on your behalf to pick up prescriptions, medical supplies, X-rays, and similar forms of protected health information, when we determine, in our professional judgment, that it is in your best interest to make such disclosures.

## Other Situations

**Organ and Tissue Donation.** If you are an organ donor, we may release medical information to organizations that handle organ procurement or organ, eye or tissue transplantation or to an organ donation bank, as necessary to facilitate organ or tissue donation and transplantation.

**Military and Veterans.** If you are a member of the Armed Forces, we may release medical information about you as required by military command authorities. We may also release medical information about foreign military personnel to the appropriate foreign military authority.

**Public Health Risks.** We may disclose medical information about you for public health activities. These activities generally include the following:

- ◆ To prevent or control disease, injury or disability
- ◆ To report births and deaths
- ◆ To report victim of abuse, neglect, or domestic violence
- ◆ To report reactions to medications
- ◆ To notify people of product, recalls, repairs or replacements
- ◆ To notify a person who may have been exposed to a disease or may be at risk for contracting or spreading a disease or condition

**Health Oversight Activities.** We may disclose medical information to federal or state agencies that oversee our activities. These activities are necessary for the government to monitor the health care system, government programs, and compliance with civil rights laws. We may disclose protected health information to persons under the Food and Drug Administration's jurisdiction to track products or to conduct post-marketing surveillance.

**Lawsuits and Disputes.** If you are involved in a lawsuit or dispute, we may disclose medical information about you in response to a court or administrative order. We may also disclose medical information about you in a response to a subpoena, discovery request or other lawful process by someone else involved in the dispute.

**Law Enforcement.** We may release medical information if asked to do so by a law enforcement official:

- ◆ In response to a court order, subpoena, warrant, summons or similar process
- ◆ To identify or locate a suspect, fugitive, material witness, or missing person
- ◆ About the victim of a crime if, under certain limited circumstances, we are unable to obtain the person's agreement
- ◆ About a death we believe may be the result of a criminal conduct
- ◆ About criminal conduct on our premises
- ◆ In emergency circumstances to report a crime; the location of the crime or victims or the identity, description or location of the person who committed the crime

**Coroners, Medical Examiners and Funeral Directors.** We may release medical information to a coroner or medical examiner. This may be necessary, for example, to identify a deceased person or determine the cause of death. We may also release medical information about patients to funeral directors as necessary to carry out their duties.

**Inmates.** If you are an inmate of a correctional institution or under the custody of a law enforcement official, we may release medical information about you to the correctional institution or law enforcement official. This release would be necessary for the institution to provide you with health care, to protect your health and safety or the health and safety of others, or for the safety and security of the correctional institution.

**Serious Threats.** As permitted by applicable law and standards of ethical conduct, we may use and disclose protected health information if we, in good faith, believe that the use of disclosure is necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public.

**Disaster Relief.** When permitted by law, we may coordinate our uses and disclosures of protected health information with public or private entities authorized by law or by charter to assist in disaster relief efforts.

## Your Rights

1. You have the right to request restrictions on our uses and disclosures of protected health information for treatment, payment and health care operations. However, we are not required to agree to your request.
2. You have the right to reasonably request to receive communications of protected health information by alternative means or at alternative locations.

3. Subject to payment of a reasonable copying charge as provided by state law, you have the right to inspect or obtain a copy of the protected health information contained in your medical and billing records and in any other practice records used by us to make decisions about you, except for:
- ◆ Psychotherapy notes, which are notes recorded by a mental health professional documenting or analyzing the contents of conversation during a private counseling session or a group, joint or family counseling session and that have been separated from the rest of your medical record
  - ◆ Information compiled in a reasonable anticipation of, or for use in, a civil, criminal, or administrative action or proceeding.
  - ◆ Protected health information involving laboratory tests when your access is required by law
  - ◆ If you are a prison inmate and obtaining such information would jeopardize your health, safety, security, custody, or rehabilitation or that of other inmates, or the safety of any officer, employee, or other person at the correctional institution or person responsible for transporting you
  - ◆ If we obtained or created protected health information as part of a research study for as long as the research is in progress, provided that you agreed to the temporary denial of access when consenting to participate in the research
  - ◆ Your protected health information is contained in records kept by a federal agency or contractor when your access is required by law
  - ◆ If the protected health information was obtained from someone other than us under a promise of confidentiality and the access requested would be reasonably likely to reveal the source of the information

We may also deny a request for access to protected health information if:

- ◆ A licensed health care professional has determined, in the exercise of professional judgment, that the access requested is reasonably likely to endanger your life or physical safety or that of another person
- ◆ The protected health information makes reference to another person (unless such other person is a health care provider) and a licensed health care professional has determined, in the exercise of professional judgment, that the access requested is reasonably likely to cause substantial harm to such other person
- ◆ The request for access is made by the individual's personal representative and a licensed health care professional has determined, in the exercise of professional judgment, that the provision of access to such personal representative is reasonably likely to cause substantial harm to you or another person

If we deny a request for access for any of the three reasons described above, then you have the right to have our denial reviewed in accordance with the requirements of applicable law.

4. You have the right to request a correction to your protected health information, but we may deny your request for correction, if we determine that the protected health information or record that is the subject of the request:
- ◆ Was not created by us, unless you provide a reasonable basis to believe that the originator of protected health information is no longer available to act on the requested amendment
  - ◆ Is not part of your medical or billing records
  - ◆ Is not available for inspection as set forth above
  - ◆ Is not accurate and complete

In any event, any agreed upon correction will be included as an addition to, and not a replacement of, already existing records.

5. You have the right to receive an accounting of disclosures of protected health information made by us to individuals or entities other than to you for the period provided by law, except for disclosures:
- ◆ To carry out treatment, payment and health care operations as provided above
  - ◆ To persons involved in your care or for other notification purposes as provided by law
  - ◆ For national security or intelligence purposes as provided by law
  - ◆ To correctional institutions or law enforcement officials as provided by law
  - ◆ That occurred prior to April 14, 2003
  - ◆ That are otherwise not required by law to be included in the accounting
6. You have the right to request and receive a paper copy of this notice from us.
7. The above rights may be exercised only by written communication to us. Any revocation or other modification of consent must be in writing delivered to us.

## **Complaints**

If you believe that your privacy rights have been violated, you should immediately contact our Practice or our Privacy Officer. All complaints must be submitted in writing. We will not take action against you for filing a complaint. You also may file a complaint with the Secretary of Health and Human Services.