

# NOTICE OF HEALTH INFORMATION PRACTICES

Effective Date April 14, 2003

# 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.

By law, we are required to provide you with our Notice of Privacy Practices (NPP). This notice describes the health information practices of Retina Consultants of Alabama and members of the medical and office staff. Retina Consultants of Alabama may share medical information for your treatment, payment, or office operation purposes described in this notice.

# OUR PLEDGE REGARDING MEDICAL INFORMATION

We understand that medical information about you and your health is personal. We are committed to protecting medical information about you. We create a record of the care and services you receive at Retina Consultants of Alabama. We need this record to provide you with quality care and to comply with certain legal requirements. This notice applies to all of the records of your care generated by Retina Consultants of Alabama, whether made by office/clinic personnel or your personal doctor. This notice describes the ways we may use and disclose medical/protected information about you. We also describe your rights and certain obligations we have regarding the use and disclosure of medical/protected information.

# OUR LEGAL DUTY TO PROTECT YOUR HEALTH INFORMATION

Federal law requires us to:

- Maintain the privacy of your protected health information that we have created in our organization or received from another healthcare provider, whether it is about your past, present, or future healthcare condition;
- Maintain the privacy of your protected health information regarding payment for your healthcare;
- Notify you about how we protect your protected health information;
- Explain how, when, and why we use and disclose protected health information about you;
- Abide by the terms of this notice, as currently in effect;
- Notify you if we are unable to agree to a requested restriction on how your protected health information is used or disclosed;
- Accommodate reasonable requests that you make to communicate health information by alternative means or at alternative location; and
- Obtain your written authorization to use or disclose protected health information for reasons other than those listed below and permitted by law.

We understand that medical information about you and your health is personal. We are committed to protecting medical information about you. In order to provide you with quality care and to comply with all legal requirements, we document (in medical and financial records) the care and services you receive at Retina Consultants of Alabama. This notice applies to those records.

# HOW WE MAY USE AND DISCLOSE MEDICAL INFORMATION ABOUT YOU

The following categories describe the different ways that we may use and disclose your medical/protected information. Not every use or disclosure in a category will be listed. However, all of the ways we are permitted to use and disclose information will fall within one of the categories.

<u>As Required by Law</u>: we will disclose medical/protected information about you when required to do so by federal, state, and local law.

<u>Public Health Activities</u>: we may disclose medical/protected information about you to public health activities. For example, we are required by law to disclose protected health information about you if you have been exposed to a communicable disease or may otherwise be at risk of spreading a disease. We are required to report child, elder, and domestic abuse or neglect to the State. We may disclose to the FDA and to manufacturers health information relative to adverse events with respect to food supplements, product, and product defects, or post-marketing surveillance information to enable product recalls, repairs, or replacement.

<u>Our Office Directory</u>: we may use and disclose certain limited information about you in our directory (or on our Sign-In Sheet) while you are in our office. This information may include your name and your location within Retina Consultants of Alabama (such as which office). This information will not include specific medical information about you.

<u>Health Oversight Activities</u>: we may disclose medical information to a health oversight agency for activities authorized by law. These oversight activities include, for example, audits, investigations, inspections, and licensure. These activities are necessary for the government to monitor the healthcare system, government programs, and compliance with civil rights laws.

<u>Lawsuits and Disputes</u>: we may disclose medical information about you in response to a lawsuit, dispute, court, or administrative order. We may also disclose medical information in response to a subpoena, discovery request, or other lawful process by another party involved in the action. We will make a reasonable effort to inform you about the request.

<u>Law Enforcement</u>: we may release medical/protected information for law enforcement purposes as required by law, in response to a valid subpoena, for identification and location of fugitives, witnesses or missing persons, for suspected victims of crimes, for deaths that may have resulted from criminal conduct, and for suspected crimes on the premises.

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

<u>Organ and Tissue Donation</u>: if you are an organ donor, we may use or release medical information to organizations that handle organ procurement or other entities engaged in procurement, banking or transportation of organ, eye, or tissue to facilitate organ or tissue donation and transportation.

<u>Others Involved in Your Care</u>: this includes medical students, other Retina Consultants of Alabama personnel or people outside our facility who are involved in taking care of you. 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. We may also disclose medical information about you to people outside our office who may be involved in your medical care after you leave, such as your local physician, family members, clergy, or others who provide services that are part of your care. We may use and disclose your medical information to tell you about or recommend possible treatment options or alternatives that may be of interest to you.

<u>For Payment</u>: we may use and disclose medical information about you so that the treatment and services you receive through Retina Consultants of Alabama may be billed to and payment may be collected from you, an insurance company, or a third party. For example, we may need to give your health plan information about treatment you received at Retina Consultants of Alabama so your health plan will pay us or reimburse you for the treatment. We may also tell your health plan information about a treatment you are going to receive to obtain prior approval or to determine whether your plan will cover the treatment.

<u>For Routine Healthcare Operations</u>: we may use and disclose medical information about you for Retina Consultants of Alabama routine operations. These uses and disclosures are necessary to run Retina Consultants of Alabama and make sure that all of our patients receive quality care. For example, we may use medical information to review our treatment and services and to evaluate the performance of our staff in caring for you. We may also combine medical information about many Retina Consultants of Alabama patients to decide what additional services Retina Consultants of Alabama should offer, what services are not needed, and whether certain new treatments are effective. We may also disclose information to doctors, technicians, medical residents and students, and Retina Consultants of Alabama personnel for review and learning purposes. We may also combine the medical information we have with medical information from other entities to compare how we are doing and see where we can make improvements in the care and services we offer. We may remove information that identifies you from this set of medical information so others may use it to study health care and health care delivery without learning who the specific patients are.

<u>Individuals Involved in Your Care or Payment for Your Care</u>: we may release medical information about you to a friend or family member who is involved in your medical care. We may also give information to someone who helps pay for your care. We may also tell your family or friends that you are in the office. In addition, we may disclose medical information about you to an entity assisting in disaster relief effort so that your family can be notified about your condition, status, and location.

<u>Appointment Reminders and Health-Related Benefits and Services</u>: we may use and disclose medical information to contact you as a reminder that you have an appointment for treatment and medical care at Retina Consultants of Alabama. We may use and disclose medical information to tell you about health-related benefits or services that may be of interest to you.

<u>Research</u>: under certain circumstances, we may use and disclose medical information about you and to researchers when their clinical research study has been approved by the appropriate Institutional Review Board. While most clinical research studies require specific patient consent, there are some instances where patient authorization is not required. For example, a research project may involve comparing the health and recovery of all patients who received one treatment to those who received another for the same condition. This would be done through a retrospective record review, with no patient contact. The Institutional Review Board reviews the research proposal to make certain that the proposal has established protocols to protect the privacy of your health information.

Fundraising Activities: we may use medical/personal information about you to contact you in an effort to raise money for a program

developed by our organization. We may also disclose contact information for fundraising purposes to a foundation related to our organization. If you do not want to be contacted in this way, you should notify us in writing.

<u>Business Associates</u>: there are some services provided in Retina Consultants of Alabama through contracts with business associates. Examples include consultants, accountants, lawyers, medical transcriptionists, and third-party billing companies. When these services are contracted, we may disclose your health information to our business associate so that they can perform the job we have asked them to do. To protect your health information, however, we require the business associate to appropriately safeguard your information.

<u>To Avert a Serious Threat to Health or Safety</u>: we may use and disclose medical information about you when necessary to prevent a serious threat to your health and safety or the health and safety of the public or another person. Any disclosure, however, would only be to someone able to help prevent the threat.

<u>Military and Veterans</u>: 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.

<u>National Security and Intelligence Activities</u>: we may release medical information about you to authorized federal officials or intelligence, counterintelligence, and other national security activities authorized by law.

<u>Protective Services for the President and Others</u>: we may disclose medical information about you to authorized federal officials so they may provide protection to the President, other authorized persons or foreign heads of state, or conduct special investigations.

<u>Workers' Compensation</u>: we may release medical information about you for workers' compensation or similar programs. These programs provide benefits for work-related injuries or illness.

<u>Inmates or Individuals in Custody</u>: 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.

Other Uses and Disclosures: any other uses and disclosures will be made only with your written authorization.

# YOUR RIGHTS REGARDIN MEDICAL INFORMATION ABOUT YOU

Although all records concerning your office visits and treatment obtained by Retina Consultants of Alabama are the property of Retina Consultants of Alabama, you have the following rights regarding medical information we maintain about you.

<u>Right to Inspect and Copy</u>: you have the right to inspect and copy medical information that may be used to make decisions about your care. Usually, this includes medical and billing records, but does not include psychotherapy notes.

To inspect and copy medical information that may be used to make decisions about you, you must submit your request in writing on the required form to Medical Records at Retina Consultants of Alabama. If you request a copy of the information, we will charge a fee for the costs of copying, mailing, or other supplies associated with your request.

We may deny your request to inspect and copy in certain very limited circumstances. If you are denied access to medical information, you may request that the denial be reviewed. A legal office chosen by Retina Consultants of Alabama will review your request and the denial. The person conducting the review will not be the person who denied your request. We will comply with the outcome of the review.

<u>Right to Amend</u>: if you feel that medical information we have about you is incorrect or incomplete, you may ask us to amend the information. You have the right to request an amendment for as long as the information is kept by or for Retina Consultants of Alabama.

To request an amendment, your request must be made in writing on the required form, and submitted to Medical Records at Retina Consultants of Alabama. In addition, you must provide a reason that supports your request.

We may deny your request for an amendment if it is not in writing or does not include a reason to support the request. In addition, we may deny your request if you ask us to amend information that:

- was not created by us, unless the person or entity that created the information is no longer available to make the amendment;
- is not part of the medical information kept by or for Retina Consultants of Alabama;
- is not part of the information which you would be permitted to inspect and copy; or
- is accurate and complete.

<u>Right to an Accounting of Disclosures</u>: you have the right to request an "accounting of disclosures". This is a list of certain disclosures we made of medical information about you.

To request this list or accounting of disclosures, you must submit your request in writing on the required form to Medical Records at Retina Consultants of Alabama. Your request must state a time period, which may not be longer than six years and may not include dates before April 14, 2003. Your request should indicate in what form you want the list (for example: on paper, electronically). The first list you request within a 12-month period will be free. For additional lists, we may charge you for the costs of providing the list. We will notify you of the cost involved and you may choose to withdraw or modify your request at that time, before any costs are incurred.

<u>Right to Request Restrictions</u>: you have the right to request a restriction or limitation on the medical information we use or disclose about you for treatment, payment, or healthcare operations. You also have the right to request a limit on the medical information we disclose about you to someone who is involved in your care or the payment for your care, like a family member or friend. For example, you could ask that we not use or disclose information about a surgery you had.

*We are not required to agree to your request.* If we do not agree, we will comply with your request unless the information is needed to provide you emergency treatment. To request restrictions you must make your request in writing on the required form to Medical Records at Retina Consultants of Alabama. In your request, you must tell us: 1) what information you want to limit; 2) whether you want to limit our use, disclosure, or both; and 3) to whom you want the limits to apply, for example, disclosures to your spouse.

<u>Right to Request Confidential Communications</u>: you have the right to request that we communicate with you about medical matters in a certain way or at a certain location. For example, you can ask that we only contact you at work or by mail.

To request confidential communications, you must make your request in writing on the required form to Medical Records at Retina Consultants of Alabama. We will not ask you the reason for your request. We will accommodate all reasonable requests. Your request must specify how or where you wish to be contacted.

<u>Right to Revoke Authorization</u>: you have the right to revoke your authorization to use or disclose your medical information except to the extent that action has already been taken in reliance on your authorization.

<u>Right to a Paper Copy of this Notice</u>: you have the right to a paper copy of this notice. You may ask us to give you a copy of this notice at any time. To obtain a paper copy of this notice, contact Medical Records at Retina Consultants of Alabama.

# CHANGES TO THIS NOTICE

We reserve the right to change this notice. We reserve the right to make the revised or changed notice effective for medical information we already have about you as well as any information we receive in the future. We will make available a copy of the current notice in Retina Consultants of Alabama facilities. The notice will contain on the first page, in the top right-hand corner, the effective date. In addition, each time you visit Retina Consultants of Alabama to receive services, we will offer you a copy of the current notice in effect.

# FOR MORE INFORMATION OR TO REPORT A PROBLEM

If you have questions and would like additional information, you may contact Medical Records at Retina Consultants of Alabama. If you believe your privacy rights have been violated, you may file a complaint with Retina Consultants of Alabama or with the Secretary of the Department of Health and Human Services. To file a complaint with Retina Consultants of Alabama, contact Medical Records. All complaints must be submitted in writing. *You will not be penalized for filing a complaint*.