



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.

We are required by law to maintain the privacy of your protected health information, to notify you of our legal duties and privacy practices with respect to your health information, and to notify affected individuals following a breach of unsecured health information. This Notice summarizes our duties and your rights concerning your information. Our duties and your rights are set forth more fully in 45 CFR Part 164. We are required to abide by the terms of our Notice that is currently in effect.

1. *Uses and Disclosures for Treatment, Payment and Health Care Operations*

The Center may use or disclose patients' PHI for the purposes of treatment, payment and health care operations, described in more detail below, without obtaining written authorization from the patient. Center providers may share patient PHI as necessary to carry out treatment, payment and health care operations related to the organized health care arrangement.

a. For Treatment

- i. The Center may use and disclose PHI in the course of providing, coordinating, or managing patients' medical treatment, including the disclosure of PHI for treatment activities of another health care provider;
- ii. These types of uses and disclosures may take place between physicians, nurses, technicians, students, and other health care professionals who provide patients with health care services or are otherwise involved in patients' care.
- iii. For example, a primary care physician treating a patient may need to use/disclose PHI to a specialist physician whom he or she consults regarding patient's condition, or to a nurse who is assisting in patient's care.

b. For Payment

- i. The Center may use and disclose PHI in order to bill and collect payment for the health care services provided to patients.
- ii. For example, the Center may need to give PHI to a patient's health plan in order to be reimbursed for the services provided to the patient.
- iii. The Center may also disclose PHI to its business associates, such as billing companies, claims processing companies, and others that assist in processing health claims.
- iv. The Center may also disclose PHI to other health care providers and health plans for the payment activities of such providers or health plans.

c. For Health Care Operations

- i. The Center may use and disclose PHI as part of its operations, including for quality assessment and improvement, such as evaluating the treatment and services patients receive and the performance of its staff in caring for patients, provider training, underwriting activities, compliance and risk management activities, planning and development, and management and administration.
- ii. The Center may disclose PHI to doctors, nurses, technicians, students, attorneys, consultants, accountants, and others for review and learning purposes, to help make sure the Center is complying with all applicable laws, and to help the Center continue to provide health care to its patients at a high level of quality.
- iii. The Center may also disclose PHI to other health care providers and health plans for such entity's quality assessment and improvement activities, credentialing and peer compliance, provided that such entity has, or has had in the past, a relationship with the patient who is the subject of the information.

d. Sharing of PHI Among the Center and the Medical Staff

- i. As an organized health care arrangement, the Center and the members of the Medical Staff will share with each other PHI that they collect from patients as necessary to carry out their treatment, payment and health care operations relating to the provision of care to patients by the Center.

2. *Other Uses and Disclosures for Which Authorization is not Required*

In addition to using or disclosing PHI for treatment, payment and health care operations, the Center may use and disclose PHI without patients' written authorization under the following circumstances:

a. As Required by Law and Law Enforcement

- i. The Center may use or disclose PHI when required to do so by applicable law.

- ii. The Center also may disclose PHI when ordered to do so in a judicial or administrative proceeding, to identify or locate a suspect, fugitive, material witness, or missing person, when dealing with gunshot and other wounds, about criminal conduct, to report a crime, the location of the crime or victims, or the identify, description, or location of a person who committed a crime, to report a death or injury resulting from a boating accident, or for other law enforcement purposes.
- b. For Public Health Activities and Public Health Risks
 - i. The Center may disclose PHI to government officials in charge of collecting information about births and deaths, preventing and controlling disease, reports of child abuse or neglect and of other victims of abuse, neglect, or domestic violence, reactions to medications or product defects or problems, or to notify a person who may have been exposed to a communicable disease or may be at risk of contracting or spreading a disease or condition.
- c. For Health Oversight Activities

The Center may disclose PHI to the government for oversight activities authorized by law, such as audits investigations, inspections, licensure or disciplinary actions, and other proceedings, actions or activities necessary for monitoring the health care system, government programs, and compliance with civil rights laws.
- d. Coroners, Medical Examiners, and Funeral Directors

The Center may disclose PHI to coroners, medical examiners, and funeral directors for the purpose of identifying a decedent, determining a cause of death, or otherwise as necessary to enable these parties to carry out their duties consistent with applicable law.
- e. Organ, Eye, and Tissue Donation

The Center may release PHI to organ procurement organizations to facilitate organ, eye, and tissue donations and transplantation.
- f. Research

Under certain circumstances, the Center may use and disclose PHI for medical research purposes.
- g. To Avoid a Serious Threat to Health or Safety

The Center may use and disclose PHI, to law enforcement personnel or other appropriate persons to prevent or lessen a serious threat to the health or safety of a person or the public.
- h. Specialized Government Functions
 - i. The Center may use and disclose PHI to military personnel and veterans under certain circumstances.
 - ii. The Center may also disclose PHI to authorized federal officials for intelligence, counterintelligence, and other national security activities, and for the provision of protective services to the President or other authorized persons or foreign heads of state or to conduct special investigations.
- i. Workers' Compensation

The Center may disclose PHI to comply with workers' compensation or other similar laws. These programs provide benefits for understanding or enforcement of labor laws.
- j. Appointment Reminders: Health-related Benefits and Services; Marketing
 - i. The Center may use and disclose your PHI to contact patients and remind them of an appointment at the Center, or to inform them of treatment alternatives or other health-related benefits and services that may be of interest to them, such as disease management programs.
 - ii. The Center may use and disclose your PHI to encourage patients to purchase or use a product or service through a face-to-face communication or by giving you a promotional gift of nominal value.
- k. Disclosures to You or for HIPAA Compliance Investigations
 - i. The Center may disclose patients' PHI to patients or to their personal representative, and is required to do so in certain circumstances described below in connection with patients' rights of access to their PHI and to an accounting of certain disclosures of their PHI.
 - ii. The Center must disclose patients' PHI to the Secretary of the United States Department of Health and Human Services (the "Secretary") when requested by the Secretary in order to investigate the Center's compliance with privacy regulations issued under the federal Health Insurance Portability and Accountability Act of 1996 ("HIPAA").

3. *Uses and Disclosure to Which You Have an Opportunity to Object*

Patients will have the opportunity to object to these categories of uses and disclosures of PHI that the Center may make:

- a. Patient Directories
 - i. Unless patients object, the Center may use some of their PHI to maintain a directory of individuals in its facility.
 - ii. This information may include patient's name, patient's location in the Center, patient's general condition (e.g. fair, stable, etc.), and religious affiliation, and the information may be disclosed to members of the clergy.
 - iii. Except for patients' religious affiliation, the information may be disclosed to other persons who ask for patient by name.
- b. Disclosures to Individuals Involved in Your Health Care or Payment for Your Health Care
 - i. Unless a patient objects, the Center may disclose his/her PHI to a family member, other relative, friend, or other person patient identifies as involved in their health care or payment for their health care.
 - ii. The Center may also notify those people about patient's location or condition.

4. *Other Uses and Disclosures of PHI for Which Authorization is Required*

Other types of uses and disclosures of your PHI not described above will be made only with your written authorization, which with some limitations you have the right to revoke in writing.

5. *Regulatory Requirements*

- a. The Center is required by law to maintain the privacy of patients' PHI, to provide individuals with notice of its legal duties and privacy practices with respect to PHI, and to abide by the terms described in this policy.
 - i. The Center reserves the right to change the terms of this policy and of its privacy policies, and to make the new terms applicable to all of the PHI it maintains.
 - ii. Before the Center makes an important change to its privacy policies, it will promptly revise this policy and post a new policy in all patient entry locations.
 - iii. Patients have the following rights regarding their PHI:
 - Patients may request that the Center restrict the use and disclosure of their PHI.
 - The Center is not required to agree to any restrictions patients request, but if it does so it will be bound by the restrictions to which it agrees except in emergency situations.
 - Effective February 17, 2010, the Center is required by the Health Information Technology for Economic and Clinical Health Act (the "HITECH Act") to honor an individual's request to restrict disclosures of PHI to health plans for payment or health care operations purposes if the PHI pertains solely to items and services paid for by the individual in full.
 - Patients have the right to request that communications of PHI to them from the Center be made by particular means or at particular locations. For instance, patients might request that communications be made at their work address, or by e-mail rather than regular mail. Patient requests must be made in writing and sent to the Privacy Officer. The Center will accommodate reasonable requests without requiring patient to provide a reason for the request.
 - iv. Generally, patients have the right to inspect and copy their PHI that the Center maintains, provided that they make their request in writing to the Center's Administrative Director.
 - Within thirty (30) days of receiving patient's request (unless extended by an additional thirty (30) days), the Center will inform the patient of the extent to which the request has or has not been granted.
 - In some cases, the Center may provide a summary of the PHI requested if patient agrees in advance to such a summary and any associated fees.
 - If patient requests paper copies of the PHI or agrees to a summary of the PHI, the Center may impose a reasonable fee to cover copying, postage, and related costs.
 - To the extent capable, the Center will comply with patient's request for a copy of their PHI in an electronic format.
 - If the Center denies access to a patient's PHI, it will explain the basis for denial and the patient's opportunity to have their request and the denial reviewed by a licensed health care professional (who was not involved in the initial denial decision) designated as a reviewing official. If the Center does not maintain the PHI requested, if it knows where that PHI is located it will tell patient how to redirect the request.

- v. If a patient believes that their PHI maintained by the Center contains an error or needs to be updated, patient has the right to request that the Center correct or supplement the PHI.
- Patient's request must be made in writing to the Center's Administrative Director, and it must explain why patient is requesting an amendment to their PHI.
 - Within sixty (60) days of receiving patient's request (unless extended by an additional thirty (30) days), the Center will inform patient of the extent to which the request has or has not been granted.
 - The Center generally can deny patient's request if the request related to PHI:
 - (i) not created by the Center;
 - (ii) that is not part of the records the Center maintains;
 - (iii) that is not subject to being inspected by patient; or
 - (iv) that is accurate and complete.
 - If patient's request is denied, the Center will provide patient a written denial that explains the reason for the denial and patient's rights to:
 - (i) file a statement disagreeing with the denial;
 - (ii) if patient does not file a statement of disagreement, submit a request that any future disclosures of the relevant PHI be made with a copy of patient's request and the Center's denial attached; and
 - (iii) complain about the denial.
 - Patient's generally have the right to request and receive a list of the disclosures of their PHI that the Center has made at any time during the six (6) years prior to that date of patient's request (provided that such a list would not include disclosures made prior to April 14, 2003).
 - The list will not include disclosure for which patient has provided a written authorization, and does not include certain uses and disclosures to which this policy already applies, such as those:
 - (i) for treatment, payment, and health care operations;
 - (ii) made to patient;
 - (iii) for the Center's patient directory or to persons involved in patient's health care;
 - (iv) for national security or intelligence purposes; or
 - (v) to correctional institutions or laws enforcement officials.
 - Patient should submit any such request to the Center's Administrative Director, and within sixty (60) days of receiving patient's request (unless extended by an additional thirty (30) days), the Center will respond to patient regarding the status of the request.
 - The Center will provide the list to patient at no charge, but if patient makes more than one request in a year patient may be charged a fee for each additional request.
 - Patients have the right to receive a paper copy of this policy ("Notice") upon request, even if patient has agreed to receive this Notice electronically.

To obtain a paper copy of this Notice, please contact the Center Administrative Director.

- vi. Patients may complain to the Center if they believe their privacy rights with respect to their PHI have been violated by contacting the Center Administrative Director and submitting a written complaint.
- vii. The Center will in no manner penalize patients or retaliate against them for filing a complaint regarding the Center's privacy practices.
- viii. Patients also have the right to file a complaint with the Secretary of the Department of Health and Human Services.
- ix. If patients have any questions about this Notice, please contact the Center Administrative Director by mail at
- 5505 Peachtree Dunwoody Rd
Suite 370
Atlanta GA 30342
- x. If patients have any questions about their medical records, please contact the Medical Records Department by telephone at (770)583-1772 or by mail at
- 5505 Peachtree Dunwoody Rd
Suite 370
Atlanta GA 30342