

# **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

As a health care provider, Milton Hall Surgical Associates, LLC d/b/a Ear, Nose and Throat Institute ("ENT Institute") is regulated by the federal Health Insurance Portability and Accountability Act of 1996 ("HIPAA"). ENT Institute is therefore required to maintain the privacy of any protected health information ("PHI"), to provide individuals with notice of its legal duties and privacy practices with respect to PHI, to notify affected individuals following a breach of unsecured PHI, and to abide by the terms described in this Notice of Privacy Practices ("Notice").

PHI is individually-identifiable health or demographic information that is created or received by ENT Institute that identifies an individual and relates to:

- past, present or future physical or mental health or condition of an individual;
- the provision of health care to an individual; and
- past, present, or future payment for the provision of health care to an individual.

Although generally ENT Institute can only share PHI with a patient's authorization, there are occasions when ENT Institute may and must share PHI without patient authorization. There are also occasions when patients have the opportunity to object to the sharing of their PHI. This Notice summarizes these circumstances and also provides information about the minimum necessary standard and your rights as a patient at ENT Institute.

#### Uses and Disclosures of PHI That Are Permitted Without Patient Authorization

**To The Individual** – ENT Institute may disclose PHI to the individual who is the subject of the information

**Treatment, Payment and Health Care Operations** – ENT Institute may use or disclose PHI for the purposes of treatment, payment and health care operations, described in more detail below, without obtaining written authorization from you.

For Treatment: ENT Institute may use and disclose PHI in the course of providing, coordinating, or managing your medical treatment, including the disclosure of PHI for treatment activities of another health care provider. These types of uses and disclosures may take place between physicians, nurses, technicians, students, and other health care professionals who provide you health care services or are otherwise involved in your care. For example, if you are being treated

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- by a primary care physician, that physician may need to use/disclose PHI to a specialist physician whom he or she consults regarding your condition, or to a nurse who is assisting in your care.
- For Payment: ENT Institute may use and disclose PHI in order to bill and collect payment for the health care services provided to you. For example, ENT Institute may need to give PHI to your health plan in order to be reimbursed for the services provided to you. ENT Institute may also disclose PHI to its business associates, such as billing companies, claims processing companies, and others that assist in processing health claims. ENT Institute may also disclose PHI to other health care providers and health plans for the payment activities of such providers or health plans. In addition, ENT Institute may disclose your PHI to third party patient assistance organizations in order to seek payment for co-payments or other amounts owed by you to ENT Institute.
- For Health Care Operations: ENT Institute may use and disclose PHI as part of its operations, including for quality assessment and improvement, such as evaluating the treatment and services you receive and the performance of our staff in caring for you, provider training, underwriting activities, compliance and risk management activities, planning and development, and management and administration. ENT Institute may disclose PHI to doctors, nurses, technicians, students, attorneys, consultants, accountants, and others for review and learning purposes, to help make sure ENT Institute is complying with all applicable laws, and to help ENT Institute continue to provide health care to its patients at a high level of quality. ENT Institute may also disclose PHI to other health care providers and health plans for such entity's quality assessment and improvement activities, credentialing and peer review activities, and health care fraud and abuse detection or compliance, provided that such entity has, or has had in the past, a relationship with the patient who is the subject of the information.

Uses and Disclosures with Opportunity to Agree or Object – Informal permission may be obtained by asking you or by circumstances that clearly give you the opportunity to agree, acquiesce, or object. If you are incapacitated, in an emergency situation, or not available, ENT Institute generally may make such uses and disclosures, if in the exercise of their professional judgment, the use or disclosure is determined to be in your best interests.

- Facility Directories: It is a common practice in many health care facilities, such as hospitals, to maintain a directory of patient contact information. ENT Institute may rely on your informal permission to list in its facility directory your name, general condition, religious affiliation, and location in an ENT Institute facility. ENT Institute may then disclose information about your condition and location in the facility to anyone asking for you by name, and also may disclose religious affiliation to clergy. Members of the clergy are not required to ask for you by name when inquiring about your religious affiliation.
- For Notification and Other Purposes: ENT Institute also may rely on your informal permission to disclose to your family, relatives, or friends, or to other persons whom you identify, PHI directly relevant to that person's involvement in your care or payment for care. This, for example, allows a pharmacist to dispense filled prescriptions to a person acting on your behalf. Similarly, ENT Institute may rely on your informal permission to use or disclose PHI for the purpose of notifying family members, personal representatives, or others responsible for your care, of your location, general condition, or death. In addition, PHI may be disclosed for notification purposes to public or private entities authorized by law or charter to assist in disaster relief efforts.

• <u>For Emergency</u>: We may disclose your information to a family member or friend when you are incapacitated or in an emergency situation. If you are unavailable or unable to object, we will use our best judgment to decide if the disclosure is in your best interest.

**Incidental Use and Disclosure** – HIPAA does not require that every risk of an incidental use or disclosure of PHI be eliminated. A use or disclosure of this information that occurs as a result of, or as "incident to," an otherwise permitted use or disclosure is permitted as long as the covered entity has adopted reasonable safeguards as required by the Privacy Rule, and the information being shared was limited to the "minimum necessary," as required by the Privacy Rule.

**Public Health Activities and Public Health Risks** – ENT Institute 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.

**For Health Oversight Activities** – ENT Institute 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.

**Judicial and Administrative Proceedings** – ENT Institute may disclose PHI in a judicial or administrative proceeding if the request for the information is through an order from a court or administrative tribunal. Such information may also be disclosed in response to a subpoena or other lawful process if certain assurances regarding notice to the individual or a protective order are provided.

**Law Enforcement Purposes** – ENT Institute may use or disclose PHI when required to do so by applicable law. ENT Institute also may disclose PHI 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 identity, description, or location of a person who committed a crime, or for other law enforcement purposes.

**Decedents** – ENT Institute 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.

**Workers' Compensation** – ENT Institute may disclose PHI to comply with workers' compensation or other similar laws. These programs provide benefits for work-related injuries or illnesses.

**Fundraising Activities** – Your PHI may be disclosed for fundraising purposes related to an ENT Institute foundation. Such disclosure may be limited to demographic information, dates of service, the departments in which you received care and the physicians who provided that care. The money raised in connection with these activities would be used to expand and support ENT Institute's provision of health care and related services to the community. If you do not want to be contacted as part of these fundraising activities, please notify the ENT Institute Privacy Officer.

**Appointment Reminders; Health-related Benefits and Services; Marketing** – ENT Institute may use and disclose your PHI to contact you, **by phone, letter, and/or answering machine**, to remind you of an appointment at ENT Institute, or to inform you of treatment alternatives or other health-related benefits and services that may be of interest to you, such as disease management programs. ENT Institute may use and disclose your PHI to encourage you to purchase or use a product or service through a face-to-face communication or by giving you a promotional gift of nominal value.

**Disclosures to You or for HIPAA Compliance Investigations** – ENT Institute may disclose your PHI to you or to your personal representative, and is required to do so in certain circumstances described below in connection with your rights of access to your PHI and to an accounting of certain disclosures of your PHI. ENT Institute must disclose your 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 ENT Institute's compliance with privacy regulations issued under HIPAA.

### Uses and Disclosures of PHI For Which Authorization is Required

Other types of uses and disclosures of your PHI not described above, such as uses and disclosures of PHI for marketing purposes or for sale, or most uses and disclosures of psychotherapy notes, will be made only with your written authorization, which with some limitations you have the right to revoke in writing.

# The Minimum Necessary Standard

HIPAA generally requires covered entities to take reasonable steps to limit the use or disclosure of, and requests for, PHI to the minimum necessary to accomplish the intended purpose.

The minimum necessary standard does not apply to the following:

- Disclosures to or requests by a health care provider for treatment purposes.
- Disclosures to the individual who is the subject of the information.
- Uses or disclosures made pursuant to an individual's authorization.
- Uses or disclosures required for compliance with HIPAA Administrative Simplification Rules.
- Disclosures to the Department of Health and Human Services ("HHS") when disclosure of information is required under the Privacy Rule for enforcement purposes.

## Notice

ENT Institute reserves the right to change the terms of this Notice and of its privacy policies, and to make the new terms applicable to all PHI it maintains. Before ENT Institute makes an important change to its privacy policies, it will promptly revise this Notice and post a new Notice throughout all facilities. We will also provide you with a revised notice at your first visit after the revision or electronically as permitted by applicable law. ENT Institute is required to abide by the terms of the Notice that is currently in effect. You have the following rights regarding your PHI:

- You may request that ENT Institute restrict the use and disclosure of your PHI.
- You have the right to limit disclosure(s) to your health plan if the disclosure(s) is for the purpose of payment or health care operations and is not otherwise required by law, if the service(s) has been paid out of pocket in full by yourself or someone else on your behalf. **Otherwise, ENT**

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- **Institute is not required to agree to any other restrictions you request**, but if ENT Institute does so it will be bound by the restrictions to which it agrees except in emergency situations. Your request must be made in writing and sent to the Privacy Officer.
- You have the right to request that communications of PHI to you from ENT Institute be made by particular means or at particular locations. For instance, you may ask that we contact you at work instead of your home. Your requests must be made in writing and it must be reasonable. Send the completed request to the Privacy Officer. ENT Institute will accommodate your reasonable requests without requiring you to provide a reason for your request. ENT Institute reserves the right to communicate or contact you by whatever means necessary if we believe the use or disclosure is necessary to lessen or prevent a serious and imminent threat to your health or safety. A mailing address where the individual will receive bills for services rendered by the ENT Institute will be required.
- You have the right to review and obtain a copy of your medical or billing records as allowed by You have the right to copy these records in an electronic form if we maintain the information in an electronic format. To obtain a copy of your records in either paper or electronic format, you must make the request in writing. We will respond to your request within 30 days of your request and we may charge a fee to cover the copying, mailing or other related costs. We may deny your request to inspect and coy in certain very limited circumstances. If you are denied access to medical information, you may request that the denial be reviewed or you may submit a written compliant. If you request a review, another licensed healthcare professional, chosen by ENT Institute, 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. If you request access to psychiatric records, Georgia law requires that your mental health care provider review your record prior to granting you access. If the provider reasonably determines that disclosure of the record would be harmful to your physical or mental health, the provider may refuse to disclose the record. If this happens, you then have the right to tell us, in writing, to disclose your records to another provider of your choice. If ENT Institute does not maintain the PHI you request, and it knows where the PHI is maintained, ENT Institute will tell you how to redirect your request.
- If you believe that your PHI maintained by ENT Institute contains an error or needs to be updated, you have the right to request that ENT Institute make an addendum to your PHI. Your request must be made in writing to the Privacy Officer, and it must explain why you are requesting an addendum to your PHI. If your request is denied, ENT Institute will provide you with a written explanation for the denial. You generally have the right to request and receive a list of the disclosures of your PHI ENT Institute has made at any time during the six (6) years prior to the date of your request. The list will not include disclosure for which you have provided a written authorization, and does not include certain uses and disclosures to which this Notice already applies, such as those: (i) made to you; (ii) for treatment, payment, and health care operations; (iii) to persons involved in your health care; or (iv) for law enforcement purposes. You should submit your written request to the Privacy Officer.
- You may complain to ENT Institute if you believe your privacy rights, with respect to your PHI, have been violated by contacting the Privacy Officer and submitting a written complaint. ENT Institute will in no manner penalize you or retaliate against you for filing a complaint regarding ENT Institute's privacy practices. You also have the right to file a complaint with the Secretary of the Department of Health and Human Services.

• You have a right to receive an accounting. As specified by law, of certain circumstances when your information is disclosed without your authorization.

If you have any questions about this Notice or want to submit a written request, please contact:

Danielle Bousselot, Compliance Officer Work: 770-740-1860 x 1178 Direct Dial: 678-206-2589 dbousselot@nsainstitute.com

You are also welcome to call ENT Institute's compliance hotline number at 844-333-0850 regarding any compliance concerns.