PIEDMONT HEALTHCARE HOSPITALS, PHYSICIAN GROUPS, AND AFFILIATED HEALTHCARE PROVIDERS

JOINT 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.

Piedmont Healthcare, Inc. Hospitals, Physician Groups and Affiliated Healthcare Providers deemed as covered entities under the federal Health Insurance Portability and Accountability Act of 1996 ("HIPAA") will be referred to in this Notice of Privacy Practices ("Notice") as "Piedmont Providers." This Notice is given to you by the Piedmont Providers to describe the ways in which the Piedmont Providers may use and disclose your medical information (called "protected health information" or "PHI") and to notify you of your rights with respect to PHI in the possession of the Piedmont Providers. Piedmont Providers protect the privacy of PHI, which also is protected from disclosure by state and federal law. In certain circumstances, pursuant to this Notice, patient authorization or applicable laws and regulations, PHI can be used by the Piedmont Providers or disclosed to other parties. Below are categories describing these uses and disclosures, along with some examples to help you better understand each category.

Uses and Disclosures for Treatment, Payment and Health Care Operations. Piedmont Providers may use or disclose your PHI for the purposes of treatment, payment and health care operations, described in more detail below, without obtaining written authorization from you.

For Treatment. Piedmont Providers 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 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. Piedmont Providers may use and disclose PHI in order to bill and collect payment for the health care services provided to you. For example, a Piedmont Provider may need to give PHI to your health plan in order to be reimbursed for the services provided to you. Piedmont Providers may also disclose PHI to their business associates, such as billing companies, claims processing companies, and others that assist in processing health claims. Piedmont Providers may also disclose PHI to other health care providers and health plans for the payment activities of such providers or health plans.

For Health Care Operations. Piedmont Providers may use and disclose PHI as part of their 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. Other activities include provider training, underwriting activities, compliance and risk management activities, planning and development, and management and administration. Piedmont Providers may disclose PHI to doctors, nurses, technicians, students, attorneys, consultants, accountants, and others for review and learning purposes. These disclosures help make sure that Piedmont Providers are complying with all applicable laws, and are continuing to provide health care to patients at a high level of quality. Piedmont Providers may also disclose PHI to other health care providers and health plans for certain of their operations, including their quality assessment and improvement activities, credentialing and peer review activities, and health care fraud and abuse detection or compliance, provided that those other providers and plans have, or have had in the past, a relationship with the patient who is the subject of the information.

For Sharing PHI Among Piedmont Healthcare Hospitals And Their Medical Staff. Piedmont Healthcare Hospitals work together with the physicians and other health care providers on staff to provide medical services to you when you are a patient at a Piedmont Healthcare Hospital. Piedmont Healthcare Hospitals and the members of their respective medical staffs will share PHI with each other as needed to perform their joint treatment, payment and health care operations activities.

For Piedmont Healthcare, Inc. Employed Physicians To Share PHI With Other Piedmont Clinic Physicians. Piedmont Healthcare, Inc. employed physicians are members of the Piedmont Clinic, a health care provider network of physicians who practice at a Piedmont Healthcare Hospital and provide medical services in offices located on or relatively near a Piedmont Healthcare Hospital campus. Piedmont Clinic physicians may need to share information about patients who will be seen by more than one Piedmont Clinic physician in order to coordinate patient care, to undertake other activities related to that patient care, and for other purposes. Certain Piedmont Clinic physicians have elected to participate in an organized health care arrangement for these purposes. The physicians participating in the organized health care arrangement will share with each other PHI that they collect from you in their physician offices as necessary to carry out their treatment, payment and health care operations relating to the organized health care arrangement.

Medical Research Medical research is vital to the advancement of science. Federal regulations permit use of protected health information in medical research, either with your authorization or when the research study at Piedmont Healthcare, Inc. is reviewed and approved by an Institutional Review Board and in some situations, to determine whether there are enough patients who would consider participating in a study here.

Other Uses and Disclosures for Which Authorization is Not Required. In addition to using or disclosing PHI for treatment, payment and health care operations, Piedmont Providers may use and disclose PHI without your written authorization under the following circumstances:

As Required by Law and Law Enforcement. Piedmont Providers may use or disclose PHI when required by law. Piedmont Providers also may disclose PHI when ordered to in a judicial or administrative proceeding, in response to subpoenas or discovery requests, 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, its location or victims, or the identity, description or location of a person who committed a crime, or for other law enforcement purposes.

For Public Health Activities and Public Health Risks. Piedmont Providers 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. Piedmont Providers 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.

Coroners, Medical Examiners, and Funeral Directors. Piedmont Providers 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.

Organ, Eye, and Tissue Donation. Piedmont Providers may release PHI to organ procurement organizations to facilitate organ, eye, and tissue donation and transplantation.

Research. Under certain circumstances, Piedmont Providers may use and disclose PHI for medical research purposes.

To Avoid a Serious Threat to Health or Safety. Piedmont Providers 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.

Specialized Government Functions. Piedmont Providers may use and disclose PHI of military personnel and veterans under certain circumstances, and 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.

Workers' Compensation. Piedmont Providers may disclose PHI to comply with workers' compensation or other similar laws that provide benefits for work-related injuries or illnesses.

Fundraising Activities. Your PHI may be used to contact you in an effort to raise money for a Piedmont Provider. Your PHI may be disclosed to a foundation related to a Piedmont Provider. Such disclosure would be limited to contact information, such as your name, address and phone number and the dates you required treatment or services at a Piedmont Provider. The money raised in connection with these activities would be used to expand and support the Piedmont Provider's provision of health care and related services to the foundation. If you do not wish to be contacted for fundraising activities, <u>you must notify</u> the appropriate

Piedmont Provider in writing and send to the Piedmont Healthcare Foundation at 1968 Peachtree Road NE, Atlanta, GA 30309.

Appointment Reminders; Health-related Benefits and Services; Limited Marketing Activities. Piedmont Providers may use and disclose PHI to remind you of an appointment, 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. Piedmont Providers 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. Piedmont Providers may disclose your PHI to you or to your personal representative, and are 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. Piedmont Providers must disclose your PHI to the Secretary of the U.S. Department of Health and Human Services (the "Secretary") when requested by the Secretary in order to investigate compliance with privacy regulations issued under HIPAA.

Uses and Disclosures to Which You May Object. You may object to the following uses and disclosures of PHI that a Piedmont Provider may make:

Patient Directories. Unless you object, a Piedmont Provider may use some of your PHI to maintain a directory of individuals in its facility. This information may include your name, your location in the facility, your general condition (e.g. fair, good, etc.), and your religious affiliation, and the information may be disclosed to members of the clergy. Except for religious affiliation, the information may be disclosed to other persons who ask for you by name.

Disclosures to Individuals Involved in Your Health Care or Payment for Your Health Care. Unless you object, Piedmont Providers may disclose your PHI to a family member, other relative, friend, or other person you identify as involved in your health care or payment for your health care. We may also notify those people about your location or condition.

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 you have the limited right to revoke in writing.

Regulatory Requirements. Piedmont Providers are required by law to maintain the privacy of your PHI, to provide individuals with notice of their legal duties and privacy practices with respect to PHI, and to abide by the terms described in this Notice. Piedmont Providers reserve the right to change the terms of this Notice and of its privacy policies, and to make the new terms applicable to all of the PHI it maintains. Before Piedmont Providers make an important change to their joint privacy policies, they will promptly revise this Notice and post a new Notice in registration and admitting areas. **You have the following rights regarding your PHI**:

You may request that a Piedmont Provider restrict the use and disclosure of your PHI. The Piedmont Provider is not required to agree to any restrictions you request, but if the entity does so it will be bound by the restrictions to which it agrees except in emergency situations.

You have the right to request that communications of PHI to you from a Piedmont Provider be made by particular means or at particular locations. For instance, you might request that communications be made at your work address, or by e-mail rather than regular mail. Your requests must be in writing and sent to the Privacy Officer. Piedmont Providers will accommodate your reasonable requests without requiring you to provide a reason.

Generally, you have the right to inspect and copy your PHI in the possession of a Piedmont Provider, if you make a request in writing to the local Medical Records Department. Within thirty (30) days of receiving your request (unless extended by an additional thirty (30) days), the Piedmont Provider will inform you of the extent to which your request has or has not been granted. In some cases, the Piedmont Provider may provide you a summary of the PHI you request if you agree in advance to such a summary and any associated fees. If you request copies of your PHI or agree to a summary of your PHI, the Piedmont Provider may impose a reasonable fee to cover copying, postage, and related costs. If the Piedmont Provider denies access to your PHI, it will explain the basis for denial and your opportunity to have the denial reviewed by a licensed health care professional (not involved in the initial denial decision) designated as a reviewing official. If the Piedmont Provider does not maintain the PHI you request, if it knows where that PHI is located it will tell you how to redirect your request.

If you believe that your PHI maintained by a Piedmont Provider contains an error or needs to be updated, you have the right to request that the entity correct or supplement your PHI. Your request must be made in writing to the local Director of Medical Records, and it must explain why you are requesting an amendment to your PHI. Within sixty (60) days of receiving your request (unless extended by an additional thirty (30) days), the Piedmont Provider will inform you of the extent to which your request has or has not been granted. Piedmont Providers generally can deny your request if your request relates to PHI: (i) not created by the entity; (ii) that is not part of the records the entity maintains; (iii) that is not subject to being inspected by you; or (iv) that is accurate and complete. If your request is denied, the Piedmont Provider will give you a written denial that explains the reason for the denial and your rights to: (i) file a statement disagreeing with the denial; (ii) if you do not file a statement of disagreement, submit a request that any future disclosures of the relevant PHI be made with a copy of your request and the entity's denial attached; and (iii) complain about the denial.

You generally have the right to request and receive a list of disclosures of your PHI a Piedmont Provider has made during the six (6) years prior to your request (but not before April 14, 2003). The list will not include disclosures (i) for which you have provided a written authorization; (ii) for treatment, payment, and health care operations; (iii) made to you; (iv) for a Piedmont Provider's patient directory or to persons involved in your health care; (v) for national security or intelligence purposes; (vi) to correctional institutions or law enforcement officials; or (vii) of a limited data set. You should submit any such request to the Privacy Officer, and within sixty (60) days of receiving your request (unless extended by an additional thirty (30) days), the Piedmont Provider will respond to you regarding the status of your request. The entity will provide the list to you at no charge, but if you make more than one request in a year you will be charged a fee of $25.00 for each additional request.

You have the right to receive a paper copy of this notice upon request, even if you have agreed to receive this notice electronically. You can review and print a copy of this notice at any Piedmont Healthcare Web site via www.piedmont.org or you may request a paper copy of this notice by contacting the Privacy Officer as described below.

You may complain to the Piedmont Providers if you believe your privacy rights with respect to your PHI have been violated by contacting the Privacy Officer and submitting a written complaint. Piedmont Providers will not penalize you or retaliate against you for filing a complaint regarding their privacy practices. You also have the right to file a complaint with the Secretary of the Department of Health and Human Services.

If you have any questions about this notice, please contact the Piedmont Healthcare Corporate Privacy Officer at (404)605-4554; e-mail: privacy.officer@piedmont.org. address: 2001 Peachtree Rd. NE, Suite 400, Atlanta, GA 30309

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