

ELITE LIFE MEDICAL, LLC NOTICE OF PRIVACY PRACTICES

This notice, in compliance with federal privacy regulations, describes how information about you may be used and disclosed and how you can get access to this information. In cases where state law is more restrictive than the federal privacy regulations, Elite Life Medical, LLC (ELM), will comply with state law. Please review this notice carefully.

I hereby give my consent to ELM to use and disclose protected health information (PHI) about me to carry out treatment, payment and health care operations (TPO). The Notice of Privacy Practices provided by ELM describes such uses and disclosures more completely. With this consent, ELM may call my home or other alternative location and leave a message on voicemail or in person in reference to any items that assist the practice in carrying out TPO, such as appointment reminders and any calls pertaining to my clinical care, including laboratory test results, among others.

With this consent, ELM may mail to my home or other alternative location any items that assist the practice in carrying out TPO, such as appointment reminder cards and patient statements. With this consent, ELM may e-mail or text me any items that assist the practice in carrying out TPO, such as appointment reminder cards and patient statements. I have the right to request that ELM restrict how it uses or discloses my PHI to carry out TPO. The practice is not required to agree to my requested restrictions, but if it does, it is bound by this agreement.

Understanding Your Health or Medical Record Information

ELM is committed to protecting medical information about you. Each time you are treated by a provider, a record of your treatment is made. Typically, this record contains your symptoms, examination and test results, diagnoses, treatment, and a plan for future care of treatment. This information is referred to as your health or medical record. Your health record is available to your treatment providers who use the ELM electronic health record. These health care providers may only access your health record as permitted by law.

Your Rights Regarding Your Health or Medical Record Information

Although your health record is the private property of the healthcare practitioner or facility that compiled it, the information belongs to you. You have the right to:

- Request a restriction on certain uses and disclosures of your information for treatment, payment, and health care operations, such as to a health care plan when you choose to pay out of pocket in full for health care services associated with a specific visit.
- Inspect and obtain a copy of the PHI contained within your medical and billing records and in any medical practice record used to make decisions about your care and treatment. Associated fees may apply for processing the copies.
- Request an amendment to your health record if you believe there is an error or discrepancy within the documentation.

- Obtain an accounting of disclosure of your medical records made by ELM to other individuals or entities.
- Request to receive confidential communications involving your PHI by other reasonable means (such as secure email, faxing, or certified mail) or at alternative locations (other than home address).
- Revoke your authorization to use or disclose health information except to the extent that action has already been taken.
- Obtain copy of this notice of information practices upon request when receiving treatment.
- Request non-participation in a Health Information Exchange (HIE). If you do not want your PHI to be accessible to authorized health care providers through the HIE you may choose to not participate or “opt-out”. If you choose to opt-out, then health care providers will not be able to access your records through HIE. Please notify your provider if you wish to opt-out.

Our Responsibilities

ELM will:

- Maintain the privacy of your PHI as required by law.
- Provide you with a copy of your PHI when you request it in writing.
- Provide you with a notice as to our legal duties and privacy practices with respect to information we collect and maintain about you.
- Notify you if we are unable to agree to a requested restriction or requested amendment.
- Accommodate reasonable requests you may have to communicate health information by alternative means or alternative locations.
- Notify you if a breach incident occurs during which your PHI becomes unsecured.
- Abide by the terms of this notice.
- Reserve the right to change our practices and to make new provisions effective for all PHI we maintain. Should our information practices change, notification will be provided to the patient directly via email or secure messaging.

How We May Use and Disclose Medical Information About You

Treatment: We may use medical information about you to provide you with medical treatment or services. We may disclose medical information about you to other providers or staff that are involved in your care within ELM.

Payment: We may use and disclose medical information about you so that the treatment and services you received at EML may be billed, and payment may be collected from you or a third party.

Health Care Operations: We may use and disclose medical information about you for ELM operational reasons. These uses and disclosures are necessary to run ELM and make sure that all our patients receive quality care.

Business Associates: We may disclose information to business associates who provide contracted services such as accounting, legal representation, claims processing, accreditation, and consulting. If such disclosures occur, we will do so subject to a contract that provides the information will be kept confidential. We may also combine the medical information we have with medical information from other health care providers 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 can use it to study health care and health care delivery without learning who the specific patients are.

As Required by Law: We will disclose medical information about you when required to do so by federal, state, or local law.

To Avert a Serious Threat to Health or Safety: We may use and disclose medical information about you when necessary to prevent a serious threat to your health and safety of the public or another person. Any disclosure, however, would only be to someone who is handling the situation.

Sale or Merger: If ELM at any time sells or merges any of its entities with another health system, the new owner may have access or acquire records associated with that entity.

Special Situations:

- Military and Veterans- Information may be released to military command authorities.
- Public Health Risks- information may be released to public agencies to prevent or control disease, deaths, abuse or neglect and product problem/recall issues.
- Lawsuits and Disputes- information may be released in response to a court or administrative order, subpoena, discovery request or other lawful process.
- Law Enforcement- information may be released to law enforcement officials (1) in response to a court order, subpoena, warrant, summons or similar process; (2) to identify or locate a suspect, fugitive, material witness, or missing persons; (3) about the victim of a crime, under certain limited circumstances; (4) about a death we believe may be the result of a criminal conduct; (5) about criminal conduct within ELM; and (6) 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.
- Health Oversight Activities- Information may be released to agencies such as the Maryland Department of Health, Office of Attorney General

Uses and Disclosures for Which an Authorization is Required

Except for the general uses and disclosures and special situations described above, we will not use or disclose your protected health information for any other purposes unless you provide a written authorization. Under federal law the following uses and disclosures require a valid authorization:

- Marketing

- Exception: If the communication is in the form of a face-to-face communication between the individual and ELM; or a promotional gift of nominal value from ELM to the individual
- Sale of PHI. We will not sell your PHI without your written authorization.

By signing this form, I am consenting to allow ELM to use and disclose my PHI to carry out TPO. I have read, understand and agree to Privacy Policy.