

## **Notice of Privacy Practices**

### **Sugarloaf Urgent Care**

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED BY SUGARLOAF URGENT CARE AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY. This notice is effective April 14, 2003. It is provided to you pursuant to provisions of the Health Insurance Portability and Accountability Act of 1996 and related federal regulations. If you have questions about this Notice please contact the Legal Services Office at the address below.

Sugarloaf Urgent Care is an agency of the State of Georgia responsible for numerous programs, which deal with medical and other confidential information. Both federal and state laws establish strict requirements for most programs regarding the disclosure of confidential information, and Sugarloaf Urgent Care must comply with those laws. For situations where more stringent disclosure requirements do not apply, this Notice of Privacy Practices describes how Sugarloaf Urgent Care may use and disclose your protected health information for treatment, payment, health care operations and for certain other purposes. This notice relates only to health information. It describes your rights to access and control your protected health information, and provides information about your right to make a complaint if you believe Sugarloaf Urgent Care has improperly used or disclosed your "protected health information." Protected health information is information that may personally identify you and relates to your past, present or future physical or mental health or condition and related health care services. Sugarloaf Urgent Care is required to abide by the terms of this Notice of Privacy Practices, and may change the terms of this notice, at any time. A new notice will be effective for all protected health information that Sugarloaf Urgent Care maintains at the time of issuance. Upon request, Sugarloaf Urgent Care will provide you with a revised Notice of Privacy Practices by posting copies at its facilities, publication on Sugarloaf Urgent Care's website, in response to a telephone or facsimile request to the Privacy Coordinator, or in person at any facility where you receive services from Sugarloaf Urgent Care.

#### **1. Uses and Disclosures of Protected Health Information**

Your protected health information may be used and disclosed by Sugarloaf Urgent Care, its administrative and clinical staff and others involved in your care and treatment for the purpose of providing health care services to you, and to assist in obtaining payment of your health care bills.

**Treatment:** Your protected health information may be used to provide, coordinate, or manage your health care and any related services, including coordination of your health care with a third party that has your permission to have access to your protected health information, such as, for example, a health care professional who may be treating you, or to another health care provider such as a specialist or laboratory.

**Payment:** Your protected health information may be used to obtain payment for your health care services. For example, this may include activities that a health insurance plan requires before it approves or pays for health care services such as; making a determination of eligibility or coverage, reviewing services provided to you for medical necessity, and undertaking utilization review activities.

**Health Care Operations:** Sugarloaf Urgent Care may use or disclose your protected health information to support the business activities of Sugarloaf Urgent Care, including, for example, but not limited to, quality assessment activities, employee review activities, training, licensing, and other business activities. Sugarloaf Urgent Care may use a sign-in sheet at the registration desk at any facility where services are provided. You may be asked to provide your name and other necessary information, and you may be called by name in the waiting room when a staff member is ready to see you, and your protected health information may be used to contact you about appointments or for other operational reasons. Your protected health information may be shared with third party "business associates" who perform various activities that assist us in the provision of your services.

Other uses and disclosures of your protected health information will be made only with your written authorization, which you may revoke in writing at any time, except as permitted or required by law as described below.

Other Permitted or Required Uses and Disclosures with Your Authorization or Opportunity to Object

Sugarloaf Urgent Care may use and disclose your protected health information in the following instances. You have the opportunity to agree or object to the use or disclosure of all or part of your protected health information

Unless you object, Sugarloaf Urgent Care may disclose protected health information for a facility directory or to a family member, relative, or any other person you identify, information related to that person's involvement in your health care and may use or disclose protected health information to notify or assist in notifying a family member, personal representative or other person responsible for your care of your location, general condition or death. Sugarloaf Urgent Care may use or disclose your protected health information to an authorized public or private entity to assist in disaster relief efforts and to coordinate uses and disclosures to family or other individuals involved in your health care. Objections may be made orally or in writing.

#### Permitted or Required Uses and Disclosures without Your Authorization or Opportunity to Object

Sugarloaf Urgent Care may use or disclose your protected health information without your authorization when required to do so by law; for public health purposes; to a person who may be at risk of contracting a communicable disease; to a health oversight agency; to an authority authorized to receive reports of abuse or neglect; in certain legal proceedings; and for certain law enforcement purposes. Protected health information may also be disclosed without your authorization to a coroner, medical examiner or funeral director; for certain approved research purposes; to prevent or lessen a threat to health or safety; and to law enforcement authorities for identification or apprehension of an individual.

Required Uses and Disclosures: Under the law, Sugarloaf Urgent Care must make disclosures to you and when required by the Secretary of Sugarloaf Urgent Care of Health and Human Services to investigate or determine Sugarloaf Urgent Care's compliance with the requirements of the Privacy Rule at 45 CFR Sections 164.500 et. seq.

## **2. Your Rights under the federal Privacy Rule**

The following is a statement of your rights with respect to your protected health information and a brief description of how you may exercise these rights.

You have the right to inspect and copy your protected health information. Upon written request, you may inspect and obtain a copy of protected health information about you for as long as Sugarloaf Urgent Care maintains the protected health information. This information includes medical and billing records and other records Sugarloaf Urgent Care uses for making medical and other decisions about you. A reasonable, cost-based fee for copying, postage and labor expense may apply. Under federal law you may not inspect or copy information compiled in anticipation of, or for use in, a civil, criminal, or administrative proceeding, or protected health information that is subject to a federal or state law prohibiting access to such information.

You have the right to request restriction of your protected health information. You may ask in writing that Sugarloaf Urgent Care not use or disclose any part of your protected health information for the purposes of treatment, payment or healthcare operations, and not to disclose protected health information to family members or friends who may be involved in your care. Such a request must state the specific restriction requested and to whom you want the restriction to apply. Sugarloaf Urgent Care is not required to agree to a restriction you request, and if Sugarloaf Urgent Care believes it is in your best interest to permit use and disclosure of your protected health information, your protected health information will not be restricted, except as required by law. If Sugarloaf Urgent Care does agree to the requested restriction, Sugarloaf Urgent Care may not use or disclose your protected health information in violation of that restriction unless it is needed to provide emergency treatment.

You have the right to request to receive confidential communications from us by alternative means or at an alternative location. Upon written request, Sugarloaf Urgent Care will accommodate reasonable requests for alternative means for the communication of confidential information, but may condition this accommodation upon your provision of an alternative address or other method of contact. Sugarloaf Urgent Care will not request an explanation from you as to the basis for the request.

You may have the right to request amendment of your protected health information. If Sugarloaf Urgent Care created your protected health information, you may request in writing an amendment of that information for as long as it is maintained by Sugarloaf Urgent Care. Sugarloaf Urgent Care may deny your request for an amendment, and if it does so will provide information as to any further rights you may have with respect to such denial.

You have the right to receive an accounting of certain disclosures Sugarloaf Urgent Care has made of your protected health information. This right applies only to disclosures for purposes other than treatment, payment or healthcare operations, excluding any disclosures Sugarloaf Urgent Care made to you, to family members or friends involved in your care, or for

national security, intelligence or notification purposes. Upon written request, you have the right to receive legally specified information regarding disclosures occurring after April 14, 2003, subject to certain exceptions, restrictions and limitations.

You have the right to obtain a paper copy of this notice from Sugarloaf Urgent Care, upon request.

All written requests regarding your rights as set forth above should be sent to the Privacy Coordinator for the DHS Division, Office or facility which maintains your PHI.

**3. Complaints related to use or disclosure of your protected health information**

You may complain to Sugarloaf Urgent Care and to the Secretary of Health and Human Services if you believe your health information privacy rights have been violated. You may file a complaint in writing with the DHS Division, Office or Facility which maintains your PHI at telephone (770) 334 - 7474, facsimile (800) 513 – 4431, or by mail to:

**4835 Sugarloaf Parkway  
Suite 200  
Lawrenceville, GA 30044**

You must state the basis for your complaint. Sugarloaf Urgent Care will not retaliate against you for filing a complaint. Mail your complaint to DFCS HIPAA Privacy Coordinator, 2 Peachtree Street, N.W. Suite 19-244, Atlanta, Georgia 30303-3142. \*Please do not send your application for services to this address\*

Please sign a copy of this Notice of Privacy Practices for Sugarloaf Urgent Care's records.

I have received a copy of this Notice on the date indicated below:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Please print name

\_\_\_\_\_  
Date

After you sign and date please mail or bring the original to:

4835 Sugarloaf Parkway, Ste 200  
Lawrenceville, GA 30044