

Notice of Privacy Practices

Your Information-Your Rights-Our Responsibilities.

Please review carefully.

This notice describes how medical information about you may be used and disclosed, and how you can get access to this information.

Your Rights	Your Choices	Our Uses and Disclosures
• Get a copy of your paper or electronic medical record • Correct your paper or electronic medical record • Request confidential communication • Ask us to limit the information we share • Get a list of those with whom we have shared your information • Get a copy of this privacy notice • Choose someone to act for you • File a complaint if you believe your privacy rights have been violated	• Tell family and friends about your condition • Provide disaster relief • Include you in a hospital directory • Provide mental health care • Market our services and sell your information • Raise funds	• Treat you • Run our organization • Bill for your services • Help with public health and safety issues • Do research • Comply with the law • Respond to organ and tissue donation requests • Work with a medical examiner or funeral director • Address workers' compensation, law enforcement, and other government requests • Respond to lawsuits and legal actions • Protect Substance Use Disorder (SUD) records

Your Rights

When it comes to your health information, you have certain rights. This section explains your rights and some of our responsibilities to help you.

Get an electronic or paper copy of your medical record

- You can ask to see or get an electronic or paper copy of your medical record and other health information we have about you. Ask us how to do this.
- We will provide a copy or a summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee.

Ask us to correct your medical record

- You can ask us to correct health information about you that you think is incorrect or incomplete. Ask us how to do this.
- We may say no to your request, but we will tell you why in writing within 60 days.

Request confidential communication

- You can ask us to contact you in a specific way, such as home or office phone, or to send mail to a different address.
- We will say yes to all reasonable requests.

Ask us to limit what we use or share

- You can ask us not to use or share certain health information for treatment, payment, or our operations. We are not required to agree to your request, and we may say no if it would affect your care.
- If you pay for a service or health care item out of pocket in full, you can ask us not to share that information for payment or our operations with your health insurer. We will say yes unless a law requires us to share that information.

Get a list of those with whom we have shared information

- You can ask for a list, called an accounting, of the times we have shared your health information for six years prior to the date you ask, who we shared it with, and why.
- We will include all disclosures except those about treatment, payment, and health care operations and certain other disclosures, such as disclosures you asked us to make. We will provide one accounting a year for free, but may charge a reasonable, cost-based fee if you ask for another one within 12 months.

Get a copy of this privacy notice

- You can ask for a paper copy of this notice at any time, even if you agreed to receive the notice electronically. We will provide you with a paper copy promptly.

Choose someone to act for you

- If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information.
- We will make sure the person has this authority and can act for you before we take any action.

File a complaint if you feel your rights are violated

- You can complain if you feel we have violated your rights by contacting us using the contact information at the end of this notice.
- You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting the HHS Office for Civil Rights complaint website.
- We will not retaliate against you for filing a complaint.

Your Choices

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

In these cases, you have both the right and choice to tell us to:

- Share information with your family, close friends, or others involved in your care
- Share information in a disaster relief situation
- Include your information in a hospital directory

If you are not able to tell us your preference, for example, if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.

In these cases, we never share your information unless you give us written permission:

- Marketing purposes
- Sale of your information
- Most sharing of psychotherapy notes

In the case of fundraising:

- We may contact you for fundraising efforts, but you can tell us not to contact you again.

Our Uses and Disclosures

How do we typically use or share your health information? We typically use or share your health information in the following ways.

Treat you

We can use your health information and share it with other professionals who are treating you.

Example: A doctor treating you for an injury asks another doctor about your overall health condition.

Run our organization

We can use and share your health information to run our practice, improve your care, and contact you when necessary.

Example: We use your health information to manage your treatment and services.

Bill for your services

We can use and share your health information to bill and get payment from health plans or other entities.

Example: We give information about you to your health insurance plan so it will pay for your services.

How else can we use or share your health information?

We are allowed or required to share your information in other ways, usually in ways that contribute to the public good, such as public health and research. We must meet certain legal requirements before we can share your information for these purposes.

Help with public health and safety issues

- Preventing disease
- Helping with product recalls
- Reporting adverse reactions to medications
- Reporting suspected abuse, neglect, or domestic violence
- Preventing or reducing a serious threat to anyone's health or safety

Do research

- We can use or share your information for health research.

Comply with the law

- We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we are complying with federal privacy law.

Respond to organ and tissue donation requests

- We can share health information about you with organ procurement organizations.

Work with a medical examiner or funeral director

- We can share health information with a coroner, medical examiner, or funeral director when an individual dies.

Address workers' compensation, law enforcement, and other government requests

- For workers' compensation claims
- For law enforcement purposes or with a law enforcement official
- With health oversight agencies for activities authorized by law
- For special government functions such as military, national security, and presidential protective services

Respond to lawsuits and legal actions

- We can share health information about you in response to a court or administrative order, or in response to a subpoena.

Our Responsibilities

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.

- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

Confidentiality of Substance Use Disorder (SUD) Records

New for 2026 pursuant to 89 FR 12472, 2024-02544. Federal law, including 42 U.S.C. § 290dd-2 and 42 CFR Part 2, requires us to protect the privacy of any Substance Use Disorder (SUD) treatment records that we maintain or receive. These federal laws provide heightened confidentiality protections for SUD information. As required by law, this notice explains how we may use or disclose SUD records and your rights with respect to this information.

Important SUD confidentiality notice

SUD records may have additional confidentiality protections beyond general health information. We will not use or disclose SUD information in a manner prohibited by applicable federal or state law.

How We May Use or Disclose SUD Information

Where permitted by applicable law, we may use or disclose SUD records in the following circumstances:

- For treatment, payment, and health care operations as authorized under HIPAA and 42 CFR Part 2.
- Pursuant to your valid written consent.
- As otherwise required or permitted by federal and state law.
- To public health authorities, oversight agencies, or law enforcement only when expressly authorized by applicable law.

We will not use or disclose SUD information in a manner that is prohibited by 42 CFR Part 2.

Prohibition on Re-Disclosure

Federal law may prohibit a recipient of SUD records from using or disclosing such records unless permitted by your consent or otherwise authorized by law.

Substance Use Disorder records disclosed under 42 CFR Part 2 remain subject to federal confidentiality protections, and unauthorized use or disclosure may be prohibited.

Your Rights Regarding SUD Information

In addition to the rights described elsewhere in this Notice, you have rights regarding your SUD records, including:

- The right to receive notice of how your SUD information may be used and disclosed.
- The right to request restrictions and confidential communications, as permitted by law.
- The right to inspect and obtain copies of your records, subject to applicable legal requirements.
- The right to file a complaint if you believe your privacy rights have been violated.

Our Responsibilities for SUD Information

We are required to protect the confidentiality of SUD records in accordance with federal law.

We maintain appropriate administrative, technical, and physical safeguards to protect SUD information from unauthorized use or disclosure and will comply with all applicable requirements of 42 U.S.C. § 290dd-2 and 42 CFR Part 2.

Changes to the Terms of this Notice

We can change the terms of this notice, and the changes will apply to all the information we have about you. The new notice will be available upon request, in our office, and on our website.

Other Instructions for Notice

This notice is effective February 16, 2026. Please note that we never market or sell personal information.

Questions or Concerns

Contact	Anne Rohr, Compliance Officer
Phone	(818) 702-0100 x1247
Email	arohr@medpointmanagement.com
Website	www.medpointmanagement.com