Phone: (601) 982-0331

Fax: (601) 981-3829



Notice of Privacy Practices

THIS NOTICE DESCRIBES HOW YOUR MEDICAL INFORMATION MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION.

PLEASE REVIEW IT CAREFULLY.

Upon request, Glynn Griffing & Associates (GGA) shall provide you with this Notice so that you will understand how we may use or share your information from your Designated Record Set. The Designated Record Set includes financial and health information referred to in this Notice as "Protected Health Information" ("PHI") or simply "health information." We are required to adhere to the terms outlined in this Notice. If you have any questions about this Notice, please contact Kim Griffing Porter.

UNDERSTANDING YOUR CLAIMS' RECORD AND INFORMATION

Each time you file a claim for reimbursement with GGA, a record of your claim is stored for historical purposes. We may use, retain and/or disclose this information in order to:

document the reimbursement claim you've requested in staying in compliance with the IRS regulations

HOW WE MAY USE AND DISCLOSE PROTECTED CLAIM INFORMATION

The following categories describe the ways that we use and disclose health information. Not every use or disclosure in a category will be listed. However, all of the ways we are permitted to use and disclose information will fall into one of the categories.

- Business Associates. There are services provided at GGA through associations with business associates. Examples include administrative software support, human resources' contact person or the designated Personal Health Information Officer. In certain circumstances, we may disclose health information so that they can assist with the job that we've been asked to do. To protect your health information, however, we require these business associates to appropriately safeguard your information.
- <u>Individuals Involved in Your Care or Payment for Your Care</u>. Unless you object, we may disclose claim information to a friend or family member who is authorized by you to have such information.
- As Required By Law. We will disclose health information about you when required to do so by federal, state or local law.
- <u>Reporting</u> Federal and state laws may require or permit GGA to disclose certain health information related to the following:
 - Judicial and Administrative Proceedings: If you are involved in a lawsuit or a dispute, we may disclose claim information about you in response to a court or administrative order. We may also disclose claim information about you in response to a subpoena, discovery request, or other lawful process by someone else involved in the dispute, but only if efforts have been made to tell you about the request or to obtain an order protecting the information requested.
- <u>Law Enforcement</u>. We may disclose claim information when requested by a law enforcement official:
 - In response to a court order, subpoena, warrant, summons or similar process;

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OTHER USES OF HEALTH INFORMATION

Other uses and disclosures of claim information not covered by this Notice or the laws that apply to us will be made only with your written permission. If you provide us permission to use or disclose claim information about you, you may revoke that permission, in writing, at any time. If you revoke your permission, we will no longer use or disclose claim information about you for the reasons covered by your written authorization. You understand that we are unable to take back any disclosures we have already made with your permission, and that we are required to retain our records of the care that we provided to you.

YOUR RIGHTS REGARDING HEALTH INFORMATION ABOUT YOU

Although your claims' record is stored at GGA, the information belongs to you. You have the following rights regarding your claim information:

<u>Right to Inspect and Copy</u>. With some exceptions, you have the right to review and copy your claim information.

You must submit your request in writing to Amy Vernon, Office Manager. We may charge a fee for the costs of copying, mailing or other supplies associated with your request.

- Right to Request Restrictions. You have the right to request a restriction or limitation on the claim information we use or disclose about you. For example, you may request that we limit the claim information we disclose to someone who is involved in your care or the payment for your care.
- Right to Request Alternate Communications. You have the right to request that we communicate with you about medical matters in a confidential manner or at a specific location. For example, you may ask that we only contact you via mail to a post office box.

You must submit your request in writing to Amy Vernon, Office Manager. We will not ask you the reason for your request. Your request must specify how or where you wish to be contacted. We will accommodate all reasonable requests.

- Right to a Paper Copy of This Notice. You have the right to a paper copy of this Notice of Privacy Practices even if you have agreed to receive the Notice electronically. You may request a copy of this Notice at any time.
- You may obtain a copy of this Notice at our website, www.glynn.info.

To obtain a paper copy of this Notice, contact Kim Griffing Porter.

CHANGES TO THIS NOTICE

We reserve the right to change this Notice. We reserve the right to make the revised or changed Notice effective for claim information we already on file as well as any information we receive in the future. We will post a copy of the current Notice at GGA and on the website. The Notice will specify the effective date on the first page, in the top right-hand corner. In addition, if material changes are made to this Notice, the Notice will contain an effective date for the revisions.

COMPLAINTS

If you believe your privacy rights have been violated, you may file a complaint with GGA or with the Secretary of the Department of Health and Human Services. To file a complaint with the GGA, contact Kim Griffing Porter. All complaints must be submitted in writing.