

Notice of Health Information Privacy Practices

This notice describes how personal health information about you may be used and disclosed and how you can get access to this information. Please review it carefully. The general format and content of this form are prescribed by Federal regulation as part of the United States government's "Administrative Simplification" program (Title 45 Code of Federal Regulations, Section 164.520). This program has been effective from April 14, 2003.

Understanding Your Health Information and The Jackson Clinic Medical Records

Each time you visit The Jackson Clinic or The Jackson Clinic Pharmacy, a record of your treatment or service is made. This Notice of Health Information Privacy Practices applies to the records of each Jackson Clinic entity.

Health care providers are required by various federal and state laws and regulations to create and maintain medical records on the patients that they treat. The health record is owned by the medical practice. Understanding what is in your record and how your health information is used helps you to appreciate the need for its accuracy, and to make more informed decisions when authorizing disclosure to others.

Typically, the patient medical record records your symptoms, examination and test results, diagnoses, treatment, and a plan for future care or treatment. This information, which is available for future reference in your Jackson Clinic medical record, serves as a:

- basis for planning your care and treatment.
- means of communication among the many health professionals who contribute to your care.
- legal document describing the care you received.
- means by which you or a third-party payer (such as an insurance company, Medicare, Medicaid, etc.) can verify that services billed were actually provided.
- a potential source of information for public health officials charged with improving the health of the state, region and nation.
- a tool with which the professional staff at The Jackson Clinic can assess and continually work to improve the care we render and the outcomes we achieve.

In addition, health information recorded in a medical record could be used as a tool in educating health professionals, and as a source of data for medical research.

The Jackson Clinic does not maintain paper charts. Since May 1999, The Jackson Clinic has had a computer-assisted, electronic patient medical record that is accessible to any Jackson Clinic physician who participates in your care. This improves quality of care and enhances the coordination of treatment throughout The Jackson Clinic's system. Also, it avoids having to pick up and carry a patient record from one location to another. The Jackson Clinic's electronic patient medical record is housed on our own computer equipment and our closed intranet network system. Recently, The Clinic unveiled a "patient portal" system, also mandated by federal law for electronic health record systems, that permits you to access information from your health record online. The patient portal was created by a subsidiary company of the firm that designs and sells our federally-certified electronic health records system.

When your prescription drugs are obtained at the Jackson Clinic Pharmacy, information about your prescription is filed in a computerized patient account. Much of this information is required to be collected and retained in accordance with federal and state laws, especially if the drug being prescribed is a controlled substance (Tennessee law requires a pharmacist dispensing a controlled substance to report details of that prescription transaction to the state's Controlled Substance Monitoring Database). Our pharmacy's record system is distinct from The Jackson Clinic's electronic medical record; however, each patient's medical record will contain information identifying the drugs known to be prescribed for the patient's use. This information is shared automatically between systems when an electronic prescription to the Pharmacy is issued.

Some uses of health information are routine, such as accessing past information for purposes of providing you treatment, and submitting information to a health insurer for the purposes of obtaining payment. These routine uses of a patient's health information are permitted without obtaining authorization from the patient. On the other hand, Federal law prohibits many "non-routine" uses of health information unless the patient is aware of those uses and has authorized them.

Our Responsibilities under Federal Law

The Jackson Clinic is required to:

- maintain the privacy of your health information.
- provide you with a notice as to our legal duties and privacy practices with respect to information we collect and maintain about you.
- abide by the terms of this notice.
- accommodate reasonable requests you may have to communicate health information to you by specified means or to alternative locations.
- notify you if we are unable to agree to a requested restriction or amendment concerning your personal health information.

We reserve the right to change our practices and to make the new provisions effective for all protected health information we maintain. Should our information practices change, as soon thereafter as administratively practicable we will make available to our patients a revised notice at all of our offices, post the revised notice at our patient care locations, and publish the revised notice on our website, www.jacksonclinic.com.

We will not use or disclose your individual health information without your authorization, except as described in this notice or as otherwise required or permitted by law. For example, federal rules require that we notify you that, unless otherwise provided in the law, your written authorization is required before The Jackson Clinic is permitted to:

- ***sell your personal health information to some third-party [45 CFR 164.508(a)(4)]***
- ***use or disclose your health information for marketing purposes [45 CFR 164.508(a)(3)]***
- ***use or disclose "psychotherapy notes," which is a special category of health record that is maintained separately from the general medical record and which, because it may contain sensitive mental health information about a patient, is not generally accessible to others. [45 CFR 164.508(a)(2)]***

Your Health Information Rights

Although your Jackson Clinic health record is the physical property of The Jackson Clinic, you have certain rights concerning the information about you that is compiled and maintained in the record. These include the rights to:

- obtain a paper copy of this notice of information practices upon request as provided in 45 CFR 164.520[c].
- inspect and obtain a copy of your health record as provided for in 45 CFR 164.524[a] and Section 201 of Title 63, Chapter 2, of Tennessee Code Annotated. Federal law further provides that you may obtain a copy of your medical record in electronic format.
- receive notification if unsecured health information has been impermissibly used or disclosed by The Jackson Clinic.
- obtain an accounting of disclosures of your health information to individuals or entities outside of The Jackson Clinic during the preceding 3 years, subject to the restrictions and limitations set forth at 45 CFR 164.528.
- request communication of your health information by specific means or to an alternative location to facilitate preserving its confidentiality, as provided in 45 CFR 164.522[b][1].
- authorize the disclosure of your health information to persons or firms that you specify to us, as provided in 45 CFR sections 164.508 and 164.510.

- revoke your authorization for non-routine uses or disclosures health information except to the extent that action has already been taken, as provided in 45 CFR 164.508[b].
- request in writing that The Jackson Clinic amend your health record as provided in 45 CFR 164.526.
- request in writing a restriction on certain uses and disclosures of your information as provided by 45 CFR 164.522[a][1]. See additional information provided below.

With respect to the above rights, all requests, authorizations and revocations must be made in writing to the Privacy Coordinator for The Jackson Clinic.

PLEASE NOTE: Only the Privacy Coordinator (or other authorized designee of the organization) may agree to a request to restrict how protected health information is used for purposes of treatment, payment or healthcare operations. Generally, The Jackson Clinic’s Privacy Coordinator may, but is not required to, agree to your restriction request. A new exception is detailed below. If The Jackson Clinic’s Privacy Coordinator agrees to your request, that agreement will be communicated in writing and, to the extent required by federal law, it will be binding throughout The Jackson Clinic organization. Generally, disclosure restrictions that may deprive another treating provider of important health information are disfavored as unfair to both the other treating provider and the patient’s overall health.

If a patient requests to restrict a disclosure of particular health information to an insurance company or to a health plan, The Clinic shall approve the request if: (1) the service to which the information pertains is paid in full “out-of-pocket” by the individual patient or patient’s representative, and (2) the law does not otherwise require that the disclosure be made. 45 CFR 164.522(a)(1)(vi). This is the only exception to the discretion that we are permitted to exercise when considering requests to restrict use or disclosure.

Similarly, only the Privacy Coordinator may receive, process and respond on behalf of The Jackson Clinic to a patient’s written request to amend a health record entry. Detailed federal rules govern this complex process. In addition, once a chart entry has been signed by the entering provider, it is locked and cannot be changed or deleted by a system user. A form developed to assist this process may be obtained from any Clinic location.

An individual Jackson Clinic physician, nurse or other employee does NOT have the authority to agree to change or delete a signed Jackson Clinic chart entry, or to agree to any restrictions that a patient may request on how the patient’s protected health information is maintained or used at The Jackson Clinic.

Disclosures for Treatment, Payment and Health Operations May Be Made Without Your Consent or Authorization

We will use your health information, and disclose it to others having a need to know, in order to treat you, to obtain payment for The Jackson Clinic from your health insurer or your private or government health plan, and for various routine health operations. These long-established uses and disclosures are preserved by federal law, and do not require any consent or authorization by you. 45 CFR 164.520[b][1][ii].

We will use your health information for your treatment.

For example: Information obtained by a nurse, physician, or other member of your Jackson Clinic healthcare team will be recorded in your record and used to determine the course of treatment that should work best for you. Your physician will document in your record his or her diagnosis and treatment plan for the benefit of others who may treat you. Those others who treat you also will record the actions they take and their observations. In that way, your physicians will know how you are responding to treatment. You could suffer harm if persons who are treating you are deprived of complete health information about you. You have a responsibility as the patient to provide full and accurate health information to your physician or other health care professional. A medical record that records your past treatment history will help you. Sharing your health information between the Jackson Clinic personnel and entities involved in your care, or sharing with non-Clinic providers of care for you (such as with the radiologists of Jackson Radiology Associates, who interpret most of our high-tech imaging scans), enhances coordination of care, increases the quality of the services you receive and reduces the chance for treatment errors. Also, our physicians and staff, using their best judgment, may disclose your personal health

information to an immediate family member, other relative, close personal friend or any other person you identify to us or who is known to be involved in or responsible for your care, when it is relevant to that person's involvement in your care or payment related to your care.

We will use your health information for payment.

For example: A bill for health services may be sent to you or to a third-party payer, such as a health insurance company or a health plan such as Medicare or TennCare. The information on or accompanying the bill will include information that identifies you, as well as various identification codes that are standard throughout the United States and which report your visit to the doctor's office, and your diagnosis, any tests or procedures that have been conducted, and medical supplies used in your treatment. The care you receive at The Jackson Clinic and the status of medical claims submitted to your insurer or health plan will be reflected on a billing statement that will be mailed to the party designated as the responsible financial party for your account. In some cases, all family members share the same insurance coverage and are consolidated on a single financial account, even though each family member has a separate medical record. Sometimes, a health insurer requests additional documentation, such as a copy of chart notes, to verify treatment before the insurance company will pay. We provide documents and information in response to those requests. Consistent with federal law requirements, The Jackson Clinic will honor your written request to not disclose your health information to your insurance company or other payer, but only if you pay the charge for your medical care in full.

We will use your health information for routine health operations. For example:

1. Quality Improvement: Members of The Jackson Clinic's medical staff, particularly our Medical Directors and our Quality Improvement Committee, may review and use information in your health record to assess the care in your case and others like it. This information will then be used in our effort to continually improve the quality and effectiveness of the healthcare services we provide. In addition, health plans and programs, such as Medicare, regularly request copies of chart notes and test results to verify the accuracy of the program's payment operations. We comply, as we are required by law to do, with requests from Medicare, or Medicare's contracted auditing firms, for such records.

2. Organized Health Care Arrangements (OHCAs). A group of providers or covered entities, working together to provide care in an efficient, coordinated, clinically-integrated setting, may be designated as an OHCA under federal privacy regulations. Since 2003, The Jackson Clinic, its medical and support staff, its Pharmacy, and its Employee Health Plan, have operated as an OHCA, sharing patient information and data to manage the delivery of care. In recent years, The Jackson Clinic has participated in other OHCAs and continues to do so with various insurance companies and managed care organizations: Cigna, HealthSpring, Vanderbilt Health Affiliated Network, and BlueCross BlueShield of Tennessee. In these arrangements, data and patient health information is shared between providers and payers to identify gaps in care, eliminate unnecessary duplication of services, foster improved compliance with preventive care services and management of chronic diseases, and other quality assessment and improvement activities. Another Jackson Clinic subsidiary, Integrated Medical Staff of Jackson, is working with the Centers for Medicare Services in the Medicare Shared Savings Program to provide these same healthcare quality improvement services for Medicare patients getting care at The Clinic, including services under Medicare's new (2015) Chronic Disease Management Program.

3. Business Associates: There are some services provided in our organization through contacts with business associates, who are non-Clinic personnel having a contractual relationship with The Jackson Clinic. Examples include contracted transcription services, an electronic medical claims processing service, and a copy service that we use when making an authorized copy of a health record, such as when you request to receive a copy of your record. We also have service relationships with companies that maintain our business record system, our electronic patient record system, our internal computer network, and various pieces of computer-assisted medical equipment, such as a CT scanner or a MRI unit. When any of these systems or services are used or performed, it may necessarily include direct or indirect disclosure of some personal health information to our business associate so that he/she/it can perform the job for which we've contracted. To protect your health information, however, we require the business associate to agree that they will appropriately safeguard your health information in compliance with federal and state laws, and federal law also requires that the business associate abide by the same privacy laws as are applicable to The Clinic.

4. Notification to you: We may use your personal health information to contact you about appointment reminders or to provide you with information about your treatment, or treatment alternatives, or services that may be of interest to you. Notifications may occur via mailings or telephone calls, including voice mail messages.

**Other Permitted and Required Uses and Disclosures
Of Health Information That May Be Made Without Your
Consent, Authorization or Opportunity to Object**

We will use your health information, and disclose it to others having a need to know, in the following situations. These uses and disclosures are specifically authorized by federal law. Health care providers such as The Jackson Clinic are required by federal regulation to notify you about these possible uses and disclosures, which do not require any consent or other authorization by you.

Required By Law: We may use or disclose your protected health information to the extent that the use or disclosure is required by law. The use or disclosure will be made in compliance with the law and will be limited to the relevant requirements of the law. You may be notified about the use or disclosure, in accordance with the particular law. 45 CFR 164.512[a].

Public Health: We may disclose your protected health information for public health activities and purposes to a public health authority that is permitted by law to collect or receive the information. The disclosure will be made for the purpose of controlling disease, injury or disability. We may also disclose your protected health information, if directed by the public health authority, to a foreign government agency that is collaborating with the public health authority. 45 CFR 164.512[b][1][i].

Abuse or Neglect: We may disclose your protected health information to a public health authority that is authorized by law to receive reports of child abuse or neglect. In addition, we may disclose your protected health information if we believe that you have been a victim of abuse, neglect or domestic violence to the governmental entity or agency authorized to receive such information. In this case, the disclosure will be made consistent with the requirements of applicable federal and state laws. 45 CFR 164.512[b][1][ii] and 164.512[c].

Communicable Diseases: We may disclose your protected health information, if authorized by law, to a person who may have been exposed to a communicable disease or may otherwise be at risk of contracting or spreading the disease or condition. 45 CFR 164.512[b][1][iv].

Workers' Compensation and Workplace Medical Surveillance: Your protected health information may be disclosed by us to an employer to comply with workers' compensation laws and otherwise as authorized to comply with legally-established workplace-related medical surveillance programs. 45 CFR 164.512[b][1][v] and 45 CFR 164.512[1].

Health Oversight: We may disclose protected health information to a health oversight agency for activities authorized by law, such as audits, investigations, inspections, licensure proceedings, disciplinary actions, and other regulatory activities and proceedings. Oversight agencies seeking this information include government agencies and contractors that oversee the health care system, government benefit programs, other government regulatory programs and civil rights laws. 45 CFR 164.512[d].

Legal Proceedings: We are permitted to disclose protected health information in the course of any judicial or administrative proceeding, in response to an order of a court or administrative tribunal. Also, we may disclose protected health information in response to a subpoena, discovery request or other lawful process, so long as there is some assurance provided to us that the individual whose protected health information is sought has been given notice of the request, or certain other conditions precedent to release of the information have been satisfied. 45 CFR 164.512[e].

Law Enforcement: We may also disclose protected health information, so long as applicable legal requirements are met, for law enforcement purposes. These law enforcement purposes include (1) disclosures pursuant to legal processes and as otherwise required by law, (2) disclosures of limited information requested for identification and location purposes, (3) disclosures pertaining to victims of a crime, (4) disclosures of suspicion that death has occurred as a result of criminal conduct, (5) disclosures that a crime occurs on the premises of the practice, and (6) disclosures while providing treatment during a medical emergency away from our premises when it is likely that a crime has occurred or is occurring. 45 CFR 164.512[f].

Research: We may disclose your protected health information to researchers when their research has been approved by an institutional review board that has reviewed the research proposal and established protocols to ensure the privacy of your protected health information, and under other circumstances in accordance with regulations governing medical research. 45 CFR 164.512[i].

Coroners, Funeral Directors, and Organ Donation: We may disclose protected health information to a coroner or medical examiner for identification purposes, determining cause of death or for the coroner or medical examiner to perform other duties authorized by law. We may also disclose protected health information to a funeral director, as authorized by law, in order to permit the funeral director to carry out his duties. We may disclose such information in reasonable anticipation of death. Protected health information may be used and disclosed for cadaveric organ, eye or tissue donation purposes. 45 CFR 164.512[g] and [h].

Criminal Activity: Consistent with applicable federal and state laws, we may disclose your protected health information, if we believe that the use or disclosure is necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public. We may also disclose protected health information if it is necessary for law enforcement authorities to identify or apprehend an individual. 45 CFR 164.512[j].

Food and Drug Administration: We may disclose your protected health information to a person or company required by the Food and Drug Administration to report adverse events, product defects or problems, biologic product deviations, to track products; to enable product recalls; to make repairs or replacements, or to conduct post-marketing surveillance. 45 CFR 164.512[b][1][iii].

Military Activity and National Security: When the appropriate conditions apply, we may use or disclose protected health information of individuals who are Armed Forces personnel (1) for activities deemed necessary by appropriate military command authorities; (2) for the purpose of a determination by the Department of Veterans Affairs of your eligibility for benefits, or (3) to foreign military authority if you are a member of that foreign military services. We may also disclose your protected health information to authorized federal officials for conducting national security and intelligence activities, including for the provision of protective services to the President or others legally authorized under federal law. 45 CFR 164.512[k].

Inmates: We may use or disclose your protected health information if you are an inmate of a correctional facility and your physician created or received your protected health information in the course of providing care to you. 45 CFR 164.512[k][5].

For More Information or to Report a Problem

If have questions and would like additional information, you may contact The Jackson Clinic's Privacy Coordinator at (731) 422-0330, or toll-free at (800) 372-8221.

If you believe your privacy rights have been violated, you can file a written complaint with the Clinic's Administrator, with the Clinic's Privacy Coordinator, or with the Secretary of Health and Human Services. There will be no retaliation for filing a complaint. No special form is required for a written complaint.

The address for submitting a comment, request, complaint or other correspondence concerning privacy of health information is:

The Jackson Clinic, P.A.
Attn: Privacy Coordinator [or Attn: Administrator]
828 North Parkway
Jackson, TN 38305

If you submit a complaint to the Secretary of HHS, the address is:

Secretary
U.S. Department of Health & Human Services
200 Independence Avenue, S.W.
Washington, D.C. 20201