

Eastern Carolina Ear, Nose & Throat – Head & Neck Surgery, PA

Notice of Privacy Practices

It has always been the policy of Eastern Carolina Ear, Nose & Throat - Head & Neck Surgery to protect the privacy/confidentiality of every patient. The protection of patient information is not only a requirement under applicable laws, but it is also an ethical and clinical obligation of every physician and employee of EC-ENT. The practice will comply with all federal and state laws related to the privacy and security of patient information.

A recent federal law requires medical practices, and other covered entities, to provide patients with a written NOTICE OF PRIVACY PRACTICES that outlines how protected health information we maintain may be used or disclosed to others. We are required to abide by the terms of the current notice; however, we reserve the right to change privacy practices when we deem it necessary. A copy of the current notice is available to you upon request, and also it appears on our website - www.easterncarolinaent.com.

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

If you consent, EC-ENT is permitted by federal law to make uses and disclosures of your health information for purposes of treatment, payment, and health care operations. Protected health information is the information we create and obtain in providing our services to you. Such information may include demographics, documenting your symptoms, examination and test results, diagnosis, treatment, and applying for future care or treatment. It also includes billing documents for those services.

Examples of uses of your health information for treatment purposes are:

It is essential that EC-ENT physicians and staff who are involved in your care have necessary information to diagnose, treat, and provide health care services to you. We may use and disclose protected health information to provide, coordinate, or manage your health care and related services. We may disclose your health information to other physicians involved in your care, as well as hospitals, laboratories, diagnostic centers, home health agencies, or other health care providers that may be involved in your care.

Examples of uses of your health information for payment purposes are:

Your protected health information may be used to file health insurance claims and billing statements for health care services provided to you, to check insurance eligibility and coordination of benefits, to obtain authorizations for services, or to collect unpaid accounts as needed to obtain payment for your health care services.

Examples for uses of your information for health care operations are:

We obtain services from insurers or other business associates, such as quality assessment, quality improvement, outcome evaluation, case management and care coordination, protocol and clinical guidelines development, training programs, credentialing, medical review, legal services, and insurance. We will share information about you with

such insurers and other business associates as necessary to obtain these services.

We may use or disclose protected health information to send appointment reminders or to reschedule appointments (such as voicemail messages, postcards, or letters), to phone in prescriptions to your pharmacist, and to train employees and medical students.

In addition, we may use a sign-in sheet at the registration desk where you will be asked to sign your name and indicate your physician. We may also call you by name in the waiting room when your physician is ready to see you.

Whenever protected health information is provided to certain Business Associates - such as billing services, medical record transcription services, computer vendors, business consultants, collection agencies, etc.; we are required to obtain contractual assurances that the Business Associate will take appropriate steps to protect your health care information. We do not, however, have direct control over Business Associates beyond these contractual assurances.

Uses and Disclosures of Protected Health Information Based Upon Your Written Authorization

Other disclosures of your protected health information will be made only with your authorization, unless otherwise permitted or required by law. You may revoke this authorization at any time, in writing, except to the extent that your physician or the physician's practice has taken action indicated in the authorization. If you are not present or able to agree or object to the use of disclosure of the protected health information, then your physician may, using professional judgment, determine whether the disclosure is in your best interest. In this case, only the protected health information that is relevant to your health care will be disclosed.

Disclosures Without Consent

Notification: Unless you object, we may use or disclose your protected health information to notify, or assist in notifying a family member, personal representative, or other person responsible for your care, about your location, and about your general condition, or your death.

Communication with Family: Using our best judgment, we may disclose to a family member, other relative, close personal friend, or any other person you identify, health information relevant to that person's involvement in your care or in payment for such care if you do not object, or in an emergency. In an emergency situation, if your physician is unable to obtain your consent he or she may still use or disclose your protected health information to treat you.

Research - We may disclose information to researchers when their research has been approved by an institutional review board which has reviewed the research proposal, and established protocols to ensure the privacy of your protected health information.

Disaster Relief - We may use and disclose your protected health information to assist in disaster relief efforts.

Funeral Directors or Coroners - We may disclose your protected health information to funeral directors or coroners consistent with applicable law to allow them to carry out their duties.

Organ Procurement Organizations - Consistent with applicable law, we may disclose your protected health information to organ procurement

organizations, or other entities engaged in the procurement, banking, transplantation of organs for the purpose of tissue donation and transplant

Marketing - We may contact you to provide you with appointment reminders, with information about treatment alternatives, or with information about other health-related benefits and services that may be of interest to you.

Fund-Raising - We may contact you as a part of a fund-raising effort.

Food and Drug Administration (FDA) - If you are seeking compensation through Workers' Compensation, we may disclose your protected health information to the extent necessary to comply with laws relating to Workers' Compensation.

Public Health - As required by law, we may disclose your protected health information to public health or legal authorities charged with preventing or controlling disease, injury, or disability.

Abuse & Neglect - We may disclose your protected health information to public authorities as allowed by law to report abuse or neglect.

Correctional Institutions - If you are an inmate of a corrections institution, we may disclose to the institution or its agents the protected health information necessary for your health and the health and safety of other individuals.

Law Enforcement - We may disclose your protected health information for law enforcement purposes as required by law, such as when required by a court order, or in cases involving felony prosecutions, or to the extent an individual is in the custody of law enforcement.

Health Oversight - Federal law allows us to release your protected health information to appropriate health oversight agencies, or for health oversight activities.

Judicial/Administrative Proceedings - We may disclose your protected health information in the course of any judicial or administrative proceeding as allowed or required by law, with your consent, or a directed by a proper court order.

Serious Threat to Health or Safety - To avert a serious threat to health or safety, we may disclose your protected health information consistent with applicable law to prevent or lessen a serious, imminent threat to the health or safety of a person or the public.

For Specialized Governmental Functions - We may disclose your protected health information for specialized government function authorized by law, such as to Armed Forces personnel, for national security purposes, or to public assistance program personnel.

Other Uses - Other uses and disclosures besides those identified in this notice will be made only as otherwise authorized by law, or with your written authorization. You may revoke the authorization as previously provided.

Website - We maintain a website that provides information about our entity. **This Notice of Privacy Practices** is available on our website: www.easterncarolinaent.com

Effective Date: April 14, 2003