NOTICE OF PRIVACY PRACTICES

This Notice describes how medical information about you may be used and disclosed by SoNE HEALTH Medical Group, PLLC ("SHMG"), and how you can get access to this information. Please review it carefully. This Notice applies to employees, physicians, dentists, volunteers, trainees, and other persons whose conduct is under the direct control of SHMG, whether or not the person is paid by SHMG.

The Health Insurance Portability and Accountability Act of 1996 ("HIPAA") establishes standards to protect individuals' medical records and other personal health information, granting patients some control over certain parts of their health information and requiring organizations such as SHMG to implement certain safeguards and practices to keep each patient's protected health information (PHI) safe. PHI includes any information created or received by SHMG that relates to the health or condition of an individual, the provision of healthcare to an individual, or payment for the provision of healthcare to an individual, and either identifies the individual or is reasonably believed to provide information that can be used to identify the individual.

SHMG'S PLEDGE REGARDING PHI:
SHMG, in alignment with applicable laws, stands committed to the privacy of each patient's PHI, and SHMG understands and respects the personal and confidential nature of this information. SHMG creates and maintains a record of the care and services provided by SHMG, as well as those records received in support of SHMG care and services, to deliver quality care and to comply with certain legal requirements. This Notice applies to all PHI created, received, or maintained by SHMG, including these records.

Laws Require that SHMG:
- Safeguard the privacy and security of PHI
- Provide individuals with this Notice
- Explain how, when, and why SHMG uses or discloses PHI
- Notify affected patients or their representatives in the event of a breach of unsecured PHI; and
- Follow the terms of this Notice, including not using or disclosing PHI without written permission other than as described in this Notice.

HOW SHMG USES AND DISCLOSES YOUR PHI
The following categories describe different ways SHMG uses and discloses your PHI as permitted or required by federal and state law. Though not an exhaustive list of examples, all the ways SHMG is permitted to use and disclose your PHI fall within one of the categories below.
Treatment: SHMG may use your PHI to treat you and may share your PHI with other healthcare providers, including those outside of SHMG, to coordinate and manage your treatment (this includes psychiatric, HIV-related, certain records that may refer to substance abuse, and most other types of PHI, excluding psychotherapy notes, if necessary for your diagnosis and treatment). For example, a doctor treating you may need to know about a chronic condition or former treatment to provide the best treatment for your current condition.

Payment: SHMG may use and disclose your PHI to bill and collect payment from you, an insurance company, a third party, or a state or federal healthcare program, including disclosure of PHI for the purpose of obtaining a prior authorization. SHMG may disclose PHI to billing and collection agencies to collect payment and to consumer reporting agencies (e.g., credit bureaus). For example, we may need to give your health plan information about visit so your health plan will pay us or reimburse you for the visit.

Healthcare Operations: SHMG may use and disclose your PHI for SHMG's own healthcare operations, including for the purpose of improving the quality, safety, and cost of care, evaluating the skills and performance of people providing care, and providing training programs for students, trainees, and other personnel. For example, we may combine health information about many patients to decide what additional services our practices should offer, what services are not needed, and whether certain new treatments are effective. We may also disclose information to doctors, nurses, and other students for quality assurance.

Business Associates: Certain services may be provided on SHMG's behalf by another person or entity (a "business associate") for the purposes of treatment, payment, or healthcare operations, and SHMG may disclose PHI to these business associates for these purposes. SHMG makes such disclosures according to written contracts that outline uses and disclosures of PHI and require business associates to appropriately safeguard information.

Fundraising Activities: SHMG may contact you or disclose limited PHI to the SFHCP Foundation, (the "Foundation") so the Foundation may contact you, in an effort to raise money for SHMG, provided you have not opted out of receiving fundraising solicitations and communications. The Foundation has been delegated the primary responsibility for all fundraising for the benefit of the University of Connecticut, including SHMG. If you wish to opt out of receiving these communications and you wish to direct SHMG to not use or disclose your PHI for fundraising efforts, contact the Foundation, Inc. at 860-200-1858.

Individuals Involved in Your Care: SHMG may disclose to a family member, relative, friend, or other person involved in your care or payment for your care, PHI directly relevant to that person's involvement in your care or payment for your care. SHMG may use or disclose PHI to notify a family member, personal representative, or other person responsible for your care of your location, general condition, or death unless you object or otherwise instruct SHMG. If you are incapacitated or otherwise unable to describe your wishes, SHMG may make such disclosures if SHMG determines such disclosures to be in your best interest. SHMG complies with additional state law confidentiality protections for minors receiving treatment for HIV/AIDS, pregnancy, abortion, venereal disease, substance abuse, or mental health. SHMG discloses PHI to correctional institution or law enforcement officials with custody of an inmate as required for the correctional institution to provide healthcare to the inmate, to protect the health or safety of the public or a person, or for the safety and security of the correctional institution.

Disaster Relief: SHMG may disclose your PHI to an entity assisting in a disaster relief effort to aid in location of you, your friends, or your family members or to provide information about your general condition or death.

De-identified Information or Limited Data Sets: SHMG may use and disclose health information about you after removing any information that potentially identifies you (de-identifying the health information). SHMG may also use and disclose health information about you that constitutes a "Limited Data Set" (as defined by HIPAA), for purposes of public health or healthcare operations, if the recipient of the information signs an agreement to protect the privacy of the information as required by federal and state law. Limited Data Sets do not contain any information that directly identifies you (such as your name, street address, Social Security number, phone number, email address, and other direct identifiers described in the HIPAA definition of a "Limited Data Set").

As Required by Law: SHMG discloses PHI as required by federal or state statute, regulation, or court opinion, including mandatory reporting obligations. Such reporting may include information about suspected abuse, abandonment, neglect, exploitation, domestic violence, workers' compensation program services, and health oversight activities.

Public Safety: SHMG may use and disclose your PHI when believed in good faith to be necessary to prevent a serious and imminent threat to the health or safety of a person or the public.

Public Health Activities: SHMG may disclose your PHI to appropriate government agencies for public health activities for the purpose of preventing or controlling disease, injury, or disability. Such reporting may include births, deaths, suspected communicable disease, suspected overdose events, medication and medical product adverse events, and product recall information.

Lawsuits and Legal Disputes: In the context of any judicial or administrative proceeding, SHMG may disclose your PHI in accordance with applicable law to comply with a court or administrative order, subpoena, discovery request, or other lawful process provided the court has appropriate jurisdiction over SHMG. Notwithstanding the above, in the event SHMG receives and maintains substance use disorder records about you subject to the confidentiality protections of 42 CFR Part 2 ("Part 2 records"), SHMG may not use or disclose such Part 2 records for purposes of civil, criminal, administrative, or legislative proceedings against you without your written consent or an appropriate court order.

Law Enforcement: SHMG may disclose a limited amount of PHI to law enforcement for specific purposes related to identifying or locating a suspect, fugitive, material witness, or missing person, related to a crime, or as required by law.

Coroners, Medical Examiners and Funeral Directors: SHMG may disclose PHI concerning deceased patients to a coroner, medical examiner, or funeral director as necessary to carry out their duties.

Specialized Government Functions: SHMG may disclose PHI as it relates to military and veterans' activities, national security and intelligence activities, protective services for the President, and medical suitability determinations for the United States Armed Forces or Department of State.

Electronic Disclosures & Health Information Exchanges: SHMG makes certain disclosures described within this Notice via electronic transmission, interface, or direct access to our electronic health records system. In addition, SHMG may participate in certain health information exchanges involving disclosure of PHI as permitted by law to other healthcare providers or entities for permitted purposes. As mandated by the State of Connecticut, SHMG participates in Connie, the statewide health information exchange. You may opt-out of Connie by contacting Connie directly as described on their website at www.conniect.org. Additionally, while other states in which a physician operates may not have a mandatory health information exchange, your health information may still be shared with those exchanges where permitted by law.

OTHER USES AND DISCLOSURES OF PHI: SHMG will obtain your authorization to use or disclose your PHI for any reasons not covered by this Notice or applicable law, including certain uses and disclosures related to marketing and the sharing of psychotherapy notes. If you provide authorization to SHMG for a certain use or disclosure of your PHI, you may revoke that authorization, in writing, at any time unless SHMG has already relied on that authorization for a use or disclosure. If you revoke your authorization, SHMG will no longer use or disclose your PHI for the reasons covered by the revoked authorization.

YOUR RIGHTS REGARDING PHI
Right to Access PHI: You have the right to access the PHI about you that SHMG maintains, including the right to inspect or obtain a copy, or both, of the PHI, as well as the right to direct SHMG to transmit a copy to a designated person or entity of your choice. You may be charged a reasonable, cost-based fee for copies of PHI. SHMG may deny a request to access PHI in certain limited circumstances, in which case SHMG will provide the reason for the denial and how to request a review of the denial.

Right to Correct or Update: You have the right to request an amendment or correction of your PHI maintained by SHMG if you feel the information is incomplete or inaccurate. You also have the right to have this request and any decision related to this request included in your record, if you so choose. SHMG requires submission of amendment requests in writing. SHMG reviews all requests and responds in writing within 60 days. If you disagree with SHMG's decision, you have the right to appeal the decision.

Right to an Accounting of Disclosures: You have the right to receive an accounting of certain disclosures of your PHI by SHMG and its business associates. This accounting will not include disclosures for treatment, payment, and healthcare operations, and certain other exceptions. SHMG requires submission of accounting of disclosure requests in writing and requires that the request state a time period no longer than six years prior to the date of the request. SHMG will provide one accounting of disclosures to you each year at no charge but may charge for additional accountings. When you request an accounting of disclosures from SHMG, SHMG may provide you with the accounting of disclosures or the names and contact information of our business associates so that you may contact them directly for an accounting of disclosures made by them.

Right to Request Restriction of Use and Disclosure of PHI: You have the right to request that SHMG restrict the use and disclosure of your PHI maintained by SHMG. SHMG requires submission of restriction requests in writing. While SHMG will try to accommodate such requests, granting of such restrictions is not always possible. However, upon request, SHMG will restrict the information disclosed to your health plan if you have already paid for the service in full prior to the time of service (unless SHMG is legally required to submit the information to the health plan). SHMG may terminate any restriction not legally required by notifying you in writing of the termination; likewise, you may terminate any restriction by notifying SHMG in writing.

Right to Receive Confidential Communications by Alternative Means: You have the right to designate a specific means by which SHMG must communicate with you about confidential matters. For example, you can require that SHMG only contact you at a single address or phone number. SHMG accommodates reasonable requests.

Right to a Copy of This Notice: You may download a copy of the current SHMG Notice of Privacy Practices from SHMG's website at www.sonehealthcare.com or you may obtain a paper copy of the current SHMG Notice of Privacy Practices at any SHMG facility. To submit any written requests related to your rights regarding PHI, please contact the Privacy or Information Security Officer:

SHMG I ATTN: Privacy Officer or Information Security Officer
PO Box 159 I Windsor, CT 06095

860-200-1858 **SoNECompliance@SoNEHEALTH.com**

CHANGES TO THIS NOTICE:
SHMG reserves the right to change this Notice, to change the practices informing this Notice, and to make the revised or changed Notice effective for all PHI maintained as well as any PHI received in the future.

AVAILABILITY OF THIS NOTICE: SHMG conspicuously publishes the current Notice on the SHMG website at www.sonehealthcare.com, posts copies of the current Notice in all SHMG locations where people receive care, and makes available copies of the current Notice throughout SHMG. The effective date of the Notice is indicated at the end of the last page. SHMG requires acknowledgement that you were offered a copy of this Notice as a condition of treatment. Any revisions of this Notice by patients or their representatives, including but not limited to strikeouts, insertions, and deletions, shall not be permitted, and SHMG may refuse to provide treatment under such circumstances.

QUESTIONS AND COMPLAINTS: If you have questions about this Notice, please direct them to your healthcare providers or the SHMG Chief Compliance & Privacy Officer in the Integrity & Compliance Office (contact information below). Additionally, if you believe your privacy rights have been violated or you wish to file a complaint about SHMG's privacy practices, please contact the SHMG Chief Compliance & Privacy Officer in the Integrity & Compliance Office:

SHMG I ATTN: Integrity & Compliance Office
PO Box 159 I Windsor, CT 06095

860-200-1858 **SoNECompliance@SoNEHEALTH.com**

SHMG acknowledges a patient's right to file a complaint regarding SHMG's privacy practices. Patients or their representatives may file a complaint directly with SHMG and/or with other agencies, including but not limited to the United States Department of Health and Human Services (DHHS) Office for Civil Rights (OCR), Centralized Case Management Operations, U.S. Department of Health and Human Services, 200 Independence Avenue, S.Q., Room 509F HHH Bldg., Washington, D.C., 20201, email: OCRComplaint@hhs.gov, online: https:// ocrportal.hhs.gov/ocr/smartscreen/main.jsf and https://www.hhs.gov/hipaa/ filing-a-complaint/index.html.

SHMG shall not retaliate against you or your representatives for filing a complaint or grievance with SHMG or any other agency. Additionally, your care will not be affected by the filing of a complaint or grievance with SHMG or any other agency.

SONE HEALTH
Medical Group

EFFECTIVE DATE OF ORIGINAL NOTICE: June 17, 2024
REVISION DATE: N/A