Greenfield, M.D. and Associates, P.A. 139 Old Solomons Island Road, Annapolis, MD 21401 NOTICE OF PRIVACY PRACTICES

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

UNDERSTANDING YOUR HEALTH RECORD/INFORMATION: A record of your visit is made each time you visit a hospital, physician, or other healthcare provider. This record contains information regarding your examination, symptoms, test results, diagnosis, treatment, and a plan for future treatment. This information may be provided to health professionals who contribute to your care. Understanding what is in your record and how your health information is used helps you to ensure its accuracy, understand the reasons why others may access your health information, and make more informed decisions when authorizing disclosure to others.

YOUR HEALTH INFORMATION RIGHTS: Your health record is the physical property of the healthcare practitioner or facility that compiled it; the information belongs to you. You have the right to request a restriction on certain uses and disclosures of your information, and request amendments to your health record. You have the right to obtain a paper copy of the notice of information practices upon request, inspect and obtain a copy of your health record (a fee may apply), obtain an accounting of disclosures of your health information, request communications of your health information by alternative means or at alternative locations, and revoke your authorization to use or disclose health information except to the extent that action has already been taken.

OUR RESPONSIBILITIES: This organization is required to maintain the privacy of your health information and provide you with a notice as to our legal duties and privacy practices with respect to information we collect and maintain about you. We must abide by the terms of this notice, notify you if we are unable to agree to a requested restriction, accommodate reasonable requests you may have to communicate health information by alternative means or at alternative locations. We reserve the right to change our health information practices and to make the new provisions effective for all protected health information we maintain. Should our Notice of Privacy Practices change, we will post the changes on our practice website, greenfieldmdandassociates.com and make a paper copy available to you at your next appointment. We will not disclose your health information without your authorization, except as described in this notice.

FOR MORE INFORMATION OR TO REPORT A PROBLEM: If you have questions or would like additional information, please contact our office manager at 410-224-2222. If you believe your privacy rights have been compromised, you can file a complaint with the Secretary of Health and Human Services. There will be no retaliation for filing a complaint.

EXAMPLES OF DISCLOSURES FOR TREATMENT, PAYMENT, AND HEALTH OPERATIONS:

Treatment: We will use and disclose your health information to provide you with medical care or services. We may disclose the information to other healthcare providers who are participating in your treatment, to pharmacists who are filling your prescriptions and to family members who are helping with your care.

Payment: A bill will be sent to you or an insurance company with information about your diagnosis, procedures, and supplies used.

Healthcare Operations: We will use and disclose your health information to members of the medical staff and the quality improvement team to assess quality of treatment and the outcome of your care and others like it to improve the quality and effectiveness of the healthcare and service we provide.

BUSINESS ASSOCIATES: When employing business associates, we may disclose some or all of your health information to perform the job we have requested. We require them to appropriately safeguard your health information. Examples of associates include, transcription services, outside testing, and copy services.

COMMUNICATION: Health professionals, using their best judgment, may disclose to family members, friends, or any other person you identify, health information relevant to that person's involvement in your care or payment related to your care.

FUNERAL DIRECTORS: We may disclose health information to funeral directors consistent with applicable law to carry out their duties.

MARKETING: We may contact you to provide appointment reminders or information about alternatives or other health related benefits and services.

FOOD AND DRUG ADMINISTRATION (FDA): As required by law, we may disclose to the FDA health information relative to adverse events with respect to food, supplements, product and product defects, or post marketing surveillance information to enable product recalls, repairs, or replacement.

WORKERS COMPENSATION: We may disclose health information to comply with laws relating to workers compensation or other similar programs established by law.

PUBLIC HEALTH: As required by law we may disclose your health information to the public health or legal authorities charged with tracking births and deaths, as well as with preventing or controlling disease, injury, or disability.

CORRECTIONAL INSTITUTION: Should you be an inmate, we may disclose to the institution or agents thereof, health information necessary for your health and the health and safety of other individuals. An inmate does not have the right to the Notice of Privacy Practices.

LAW ENFORCEMENT: We may disclose health information for law enforcement purposes as required by law or in response to a valid subpoena. Federal law makes provisions for your health information to be released to an appropriate health oversight agency, public health authority or attorney.

NOTICE OF PRIVACY PRACTICES: This notice will be posted in the office. Patients will be offered a paper copy and the notice will be available for downloading from our website.

Revised: January, 2018