



Notice of Privacy Practices

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.

During your treatment at FocusPoint Primary and Urgent Care PLLC (DBA FocusPoint Urgent Care), doctors, nurses, and other caregivers will gather information about your medical history and your current health. This notice explains how such information may be used and shared with others. It also explains your privacy rights about this kind of information. The terms of this notice apply to health information created or received by FocusPoint Urgent Care and all health care professionals providing services at FocusPoint Urgent Care. We are required by law to make sure that medical information that identifies you is kept private, give you this notice of our legal duties and privacy practices with respect to medical information about you, follow the terms of the notice that is currently in effect, and notify you in the event there is a breach of any unsecured protected health information about you.

USES AND DISCLOSURES OF YOUR MEDICAL INFORMATION

Your medical information may be used and disclosed for the following purposes:

For Treatment:

We may use medical information about you to provide you with medical treatment or services. We may share your information with doctors, nurses, technicians, or other health care personnel who are involved in your treatment. For example, a clinician treating you for an infection may need to know if you have another condition that could affect your treatment plan and recovery. We also may disclose your medical information to physicians or organizations outside FocusPoint Urgent Care who may be involved with your overall health care.

For Payment:

We may use and disclose medical information about you so that the treatment and services you receive at our facility may be billed to, and payment may be collected from you, an insurance company or a third party. For example, we may need to give your health plan information about a procedure you received at a clinic so that FocusPoint Urgent Care can be reimbursed for the treatment. We may give your health plan information to obtain prior approval for a treatment you may receive or to determine whether your plan will cover the treatment.

For Health Care Operations:

We may use and disclose medical information about you for health care operations. These uses and disclosures are necessary to run FocusPoint Urgent Care and make sure all patients receive quality care. For example, we may use your information to review your treatment and services and to evaluate the performance of the staff caring for you. We may also disclose information to doctors, nurses, technicians, and other personnel for review purposes.

Minnesota law generally requires patient consent for disclosures of health records for treatment, payment and health care operations purposes, unless the disclosure is to a related provider for current treatment, consent is not possible due to a medical emergency, or the release is authorized by law. Unless one of these exceptions applies, we will get your written consent prior to making disclosures outside FocusPoint Urgent Care for treatment, payment or health care operations purposes.

People Assisting in Your Care:

We will only disclose medical information to those taking care of you, helping you to pay your bills, or other close family members or friends if these people need to know this information to help you, and then only to the extent permitted by law. For example, we may provide limited medical information to allow a family member to pick up a prescription for you. Generally, we will get your written consent prior to making disclosures about you to family or friends. If you are able to make your own health care decisions, FocusPoint Urgent Care will ask your permission before using your medical information for these purposes. If you are unable to make health care decisions, FocusPoint Urgent Care may disclose relevant medical information to family members or other responsible people if we feel it is in your best interest to do so, including in an emergency situation.

Required By Law:

We may use or disclose your medical information to the extent that the use or disclosure is required by federal, state, or local law.

To Avert a Serious Threat to Health or Safety:

We may use and disclose medical information about you when necessary to prevent a serious threat to your health and safety or the health and safety of the public or another person. Any disclosure must be only to someone able to help prevent the threat. Minnesota law generally does not permit these disclosures unless we have your written consent to do so or when the disclosure is specifically required by law, including limited circumstances in which FocusPoint Urgent Care professionals have a “duty to warn” potential victims or law enforcement officials of specific threats.

Public Health:

We may disclose your medical information for public health activities and purposes to a public health authority that is permitted by law to collect or receive the information. These disclosures may include, but are not limited to, the following:

- To prevent or control disease, injury or disability;
- To report births and deaths;
- To report immunizations;
- To report child abuse or neglect, or abuse of a vulnerable adult;
- To report reactions to medications or problems with products;
- To notify people of recalls of products they may be using;
- To notify a person who may have been exposed to a disease or may be at risk for contracting or spreading a disease or condition; or
- To the Food and Drug Administration as permitted or required by law.

Health Oversight:

We may disclose medical information to a health oversight agency for health oversight activities authorized by law, such as audits, investigations, inspections, and licensure activities. These activities are necessary for the government to monitor the health care system, government programs, and compliance with civil rights laws. Oversight agencies oversee the health care system, government benefit programs, other government regulatory programs, and civil rights laws. Minnesota law requires that patient-identifying information (for example, your name, social security number, etc.) be removed from most disclosures for health oversight purposes, unless you have provided us with written consent for the disclosure.

Legal Proceedings:

We may disclose your medical information in the course of a judicial or administrative proceeding as required or permitted by law, including in response to a valid order of a court or administrative tribunal, subpoena, search warrant, discovery request, or other similar process.

Law Enforcement:

We may disclose your medical information for law enforcement purposes in response to a valid court order, a grand jury subpoena, or warrant, or with your written consent, or as otherwise required by law. Law enforcement purposes may include limited information requests for identification and location purposes, evidence of a crime committed on our premises, and suspicion that death has occurred as a result of criminal conduct, and reports of gunshot wounds, all as required by law.

Coroners, Medical Examiners, and Funeral Directors:

We may disclose your medical information to a coroner or medical examiner for identification purposes, cause of death determinations or for the coroner or medical examiner to perform other duties authorized by law. Minnesota law generally requires the consent of a patient's authorized family or legal representative for disclosures of health information to funeral directors to carry out funeral-related duties.

Organ and Tissue Donation:

We may release your medical information to organizations that handle organ procurement or organ, eye or tissue transplantation, or to an organ donation bank, as necessary to facilitate organ or tissue donation and transplantation.

Research:

Federal law permits FocusPoint Urgent Care to use and disclose medical information about you for research purposes, either with your authorization or when the study is reviewed for privacy protection by an institutional review board or privacy board before the research begins. In some cases, researchers may be permitted to use information in a limited way to determine whether the study or the potential participants are appropriate. Minnesota law generally requires consent before information can be released to an outside researcher. We will make a good faith effort to obtain your consent or refusal to participate in any research study, as required by law, prior to releasing any identifiable information about you to outside researchers.

Appointment Reminders, Treatment Alternatives and Other Health Information:

We may use and disclose your medical information to send you reminders about future appointments or other communications about your care. Your medical information may also be used to give you information about new or alternative treatments or other health care benefits and services that may be of interest to you.

Military Activity and National Security:

We will release medical information about you to authorized federal officials for intelligence, counter-intelligence, and other national security activities only as required by law or with your written consent. If you are a member of the armed forces, we will release medical information about you as requested by military command authorities if we are required to do so by law, or when we have your written consent. We may also disclose your medical information to authorized federal officials for the provision of protective services to the President or other authorized persons.

Workers' Compensation:

We may disclose your medical information as authorized to comply with workers' compensation laws and other similar legally established programs that provide benefits for work-related injuries or illnesses.

Inmates:

If you are an inmate of a correctional institution or under the custody of a law enforcement official, we may disclose your medical information to the correctional institution or law enforcement official or if the disclosure is required by state or federal law.

Immunization Registry:

We may disclose your immunization information to the Minnesota Department of Health via the Minnesota Immunization Information Connection system (MIIC). MIIC is a confidential system that stores electronic immunization records that makes it easy to keep track of vaccinations and helps ensure Minnesotans get the right vaccines at the right time. MIIC may disclose child immunization proof to schools.

Business Associates:

Some of our services are provided through contracts or agreement with “business associates.” Examples may include, though not limited to, consultants, lawyers, and collection agencies. We may disclose your health information to these people so they can perform the job we have asked them to do. Whenever an arrangement between our office and a business associate involves the use or disclosure of your health information, we will have a written contract that contains terms that will protect the privacy of your information and prohibit redisclosure of the information unless specifically permitted by law.

Breach Notification Purposes:

We may use or disclose your medical information to provide legally required notices of unauthorized access to or disclosure of your health information.

Someone Authorized to Make Decisions on Your Behalf:

We may disclose information to those authorized to make decisions on your behalf, such as a power of attorney or a guardian.

Substance Use Disorder Records

We are not a substance use disorder (SUD) treatment program under federal law, but we may receive or maintain information from a SUD program that is covered by 42 CFR Part 2. If we do, we will not use or disclose SUD information in a criminal, civil, administrative, or legislative proceeding by any Federal, State, or local authority against you unless we have your written consent, or a court order that is accompanied by a subpoena or other legal requirement compelling disclosure issued after you have been given notice and an opportunity to be heard. Other uses and disclosures, including for fundraising purposes, will require your signed authorization.

OTHER USES OF MEDICAL INFORMATION

We will not use or disclose your health information for any purpose other than those identified in the previous sections without your specific, written authorization. Your health information will not be used or disclosed for marketing purposes or sales without your authorization. If you give us authorization to use or disclose health information about you, you may revoke that authorization, in writing, at any time. If you revoke your authorization, we will no longer use or disclose information about you, except to the extent we have already relied on your authorization. We cannot take back any uses or disclosures already made with your permission. Also, we are required to retain records of the care we provided to you.

YOUR RIGHTS

You have the following rights regarding medical information we maintain about you:

Right to Inspect and Copy:

You have the right to inspect and copy medical information that may be used to make decisions about your care. Usually, this includes medical and billing records maintained by FocusPoint Urgent Care.

To inspect and copy your medical information, you must submit your request in writing to FocusPoint Urgent Care at the address on the bottom of this Notice. If you request a copy of information, we may charge a fee for the cost of copying, mailing or other supplies associated with your request to the extent permitted by state and federal law. If we maintain your health information in an electronic health record, you have the right to receive a copy of your health information in electronic form. You may also direct us to provide such electronic health information directly to an entity or person clearly and specifically designated by you in writing.

We may deny your request to inspect and copy in certain very limited circumstances. If you are denied access to your health information, you may request the denial be reviewed.

Right to Amend:

If you feel that the medical information we have about you is incorrect or incomplete, you may ask us to amend the information. You have the right to request an amendment for as long as the information is kept by or for FocusPoint Urgent Care. To request an amendment, your request must be made in writing and submitted to FocusPoint Urgent Care. You must provide a reason that supports your request. We may deny your request for an amendment if it is not in writing or does not include a reason to support the request if you ask us to amend information that:

- Was not created by us, unless the person or entity that created the information is no longer available to make the amendment;
- Is not part of the medical information kept by or for FocusPoint Urgent Care;
- Is not part of the information which you would be permitted to inspect and copy; or
- Is accurate and complete.

Right to an Accounting of Disclosures:

You have the right to request an "accounting of disclosures." This is a list of the disclosures we made of medical information about you. The list will not include disclosures: (1) for purposes of treatment, payment, or health care operations; (2) made to you; (3) made pursuant to your authorization; (4) made to friends or family in your presence or because of an emergency or disaster; (5) for national security or intelligence purposes; (6) to correctional institutions or law enforcement; (7) as part of a limited data set; or (8) incident to otherwise permissible disclosures. Your request must state a time period, which may not be longer than six (6) years.

To request this list of disclosures, you must submit your request in writing to FocusPoint Urgent Care. Your request should indicate in what form you want the list (for example, on paper, or

electronically). You may receive one free accounting in any 12-month period. We may charge you for additional requests.

Right to Request Restrictions:

You have the right to request a restriction or limitation on the medical information we use or disclose about you for treatment, payment, or health care operations. You also have the right to request a limit on the medical information we disclose about you to someone who is involved in your care or the payment for your care, like a family member or friend. For example, you can ask that we not use or disclose information about a surgery you had. We are not required to agree to your request. If we do agree, we will comply with your request unless the information is needed to provide you emergency treatment. We are required to agree to your request if you pay for treatment, services, supplies and prescriptions "out of pocket" and you request the information not be communicated to your health plan for payment or health care operations purposes. There may be instances where we are required to release this information if required by law.

To request restrictions, you must make your request in writing to FocusPoint Urgent Care. In your request you must tell us (1) what information you want to limit; (2) whether you want to limit our use, disclosure, or both; and (3) to whom you want the limits to apply, for example, disclosures to your spouse.

Right to Request Confidential Communications:

You have the right to request that we communicate with you about health matters in a certain way or at a certain location. For example, FocusPoint Urgent Care reminds you of upcoming appointments and missed appointments. You can ask that we do not contact you, that we send this correspondence to an address other than your home, or you can ask that we only contact you by phone.

To request confidential communications, you must make your request in writing to FocusPoint Urgent Care. We will not ask you the reason for your request. We will accommodate all reasonable requests. Your request must specify how or where you wish to be contacted.

Right to be Notified of a Breach:

You have the right to be notified as required by law in the event that we (or a Business Associate of ours) discover a breach of your unsecured protected health information.

Right to a Paper Copy of this Notice:

You have the right to a paper copy of this notice. You may ask us to give you a copy of this notice at any time. To obtain a paper copy of this notice, call during regular working hours.

CHANGES TO THIS NOTICE

The effective date of this notice is January 1, 2026. We may change the terms of the notice at any time. We reserve the right to make the revised or changed notice effective for medical information we already have about you, as well as any information we receive in the future. If the terms of this notice are changed, FocusPoint Urgent Care will give you a revised notice upon

request and will post the revised notice on our website and in designated locations at FocusPoint Urgent Care.

COMPLAINTS OR QUESTIONS

If you believe your privacy rights have been violated, you may file a complaint with FocusPoint Urgent Care or with the Secretary of the Department of Health and Human Services. All complaints must be submitted in writing. You will not be penalized for filing a complaint.

If you have any questions about this notice or would like to file a complaint, please contact:

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