# **HIPAA Privacy Notice and Agreement**

THIS HIPAA NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THAT INFORMATION.

PLEASE REVIEW THIS NOTICE CAREFULLY.

This Agreement, the "HIPAA NOTICE AND AGREEMENT is made this date named below by and between the "Parties", the patient named below, Huntsville Chiropractic and Nutrition Center, LLC., d/b/a Millar Functional Medicine hereafter collectively called "MILLAR" including but not limited to its Doctors, Providers, employees, associates, agents, and assigns. MILLAR is committed to maintaining the privacy of your protected health information ("PHI"), which includes information about your health condition and the care and treatment you receive from us. The creation of a record detailing the care and services you receive helps this clinic to provide you with quality health care. This Privacy Notice details how your PHI may be used and disclosed to third parties and also details your rights regarding your PHI.

## Disclosure for Treatment, Treatment by others, Payment, and Operations Purposes

MILLAR may use and/or disclose your PHI for the purposes of:

- (a) **Our Treatment** In order to provide you with health care and treatments, MILLAR and its staff may disclose you PHI as necessary.
- (b) **Treatment by Others** In order to provide you with the health care you require, MILLAR will provide your PHI to those health care professionals, whether on MILLAR's staff or not, directly involved in your care so that they may understand your health condition and needs. For example, another physician treating you for lower back pain may need to know the results of your latest physician examination by this office.
- (b) **Payment** In order to get paid for services provided to you, MILLAR will provide your PHI, directly or through a billing service, to appropriate third party payers, pursuant to their billing and payment requirements. MILLAR may also need to tell third parties about treatment you will receive so that it can determine whether or not it will cover the treatment expense.
- (c) **Health Care Operations** In order for Millar to operate in accordance with applicable law and regulations and in order for MILLAR to continue to provide quality and efficient care, it may be necessary for us to compile, use, and/or disclose your PHI. For example, MILLAR may use your PHI in order to evaluate the performance of the Practice's personnel in providing care to you.

#### NO CONSENT REQUIRED

MILLAR may use and/or disclose your PHI without a written Consent from you in the following instances:

- (a) **De-identified Information** Information that does not identify you and, even without your name, cannot be used to identify you.
- (b) **Business Associate** To a business associate if MILLAR obtains satisfactory written assurance, in accordance with applicable law, that the business associate will appropriately safeguard your PHI. A business associate is an entity that assists us in undertaking some essential function, such as a billing company that assists the office in submitting claims for payment to insurance companies or other payers.
- (c) **Personal Representative** To a person who, under applicable law, has the authority to represent you in making decisions related to your health care.
- (d) Emergency Situations -
  - (i) for the purpose of obtaining or rendering emergency treatment to you provided that we attempt to obtain your Consent as soon as possible; or
  - (ii) to a public or private entity authorized by law or by its charter to assist in disaster relief efforts, for the purpose of coordinating your care with such entities in an emergency situation.
- (e) **Communication Barriers** If, due to substantial communication barriers or inability to communicate, we have been unable to obtain your Consent and we determine, in the exercise of our professional judgment, that your Consent to receive treatment is clearly inferred from the circumstances.
- (f) **Public Health Activities** Such activities include, for example, information collected by a public health authority, as authorized by law, to prevent or control disease.
- (g) **Abuse, Neglect or Domestic Violence** To a government authority if MILLAR is required by law to make such disclosure. If MILLAR is authorized by law to make such a disclosure, it will do so if we believe that the disclosure is necessary to prevent serious harm.
- (h) **Health Oversight Activities** Such activities, which must be required by law, involve government agencies and may include, for example, criminal investigations, disciplinary actions, or general oversight activities relating to the community's health care system.

- (i) **Judicial and Administrative Proceeding** For example, MILLAR may be required to disclose your PHI in response to a court order or a lawfully issued subpoena.
- (j) Law Enforcement Purposes In certain instances, your PHI may have to be disclosed to a law enforcement official. For example, your PHI may be the subject of a grand jury subpoena. Or, we may disclose your PHI if we believe that your death was the result of criminal conduct.
- (k) **Coroner or Medical Examiner** MILLAR may disclose your PHI to a coroner or medical examiner for the purpose of identifying you or determining your cause of death.
- (I) **Research** If MILLAR is involved in research activities, your PHI may be used, but such use is subject to numerous governmental requirements intended to protect the privacy of your PHI.
- (m) Avert a Threat to Health or Safety MILLAR may disclose your PHI we believe that such disclosure is necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public and the disclosure is to an individual who is reasonably able to prevent or lessen the threat.
- (n) **Specialized Government Functions** This refers to disclosures of PHI that relate primarily to government activities.
- (o) **Workers' Compensation** If you are involved in a Workers' Compensation claim, MILLAR may be required to disclose your PHI to an individual or entity that is part of the Workers' Compensation system.
- (p) **National Security and Intelligence Activities** MILLAR may disclose your PHI in order to provide authorized governmental officials with necessary intelligence information for national security activities and purposes authorized by law.
- (q) **Military and Veterans** If you are a member of the armed forces, MILLAR may disclose your PHI as required by the military command authorities.
- (r) Force Majeure Events and circumstances beyond reasonable control of Millar

## TREATMENT OPTIONS

MILLAR has an open room and open-door policy which may extend to its examination and treatment rooms. Your PHI may be disclosed to others by this open room open door policy. This open room policy includes separation curtains. Should you desire the more privacy, the door to be closed or your examination or treatment to be in private, it is <u>your responsibility</u> to request the treating physician move you to a private room, or shut the door.. As the door is open of curtains separate patients, other patients and their guests may see your fully clothed examination, treatment, hear your health complaints and conversation with the treating physician. Furthermore, it is our normal policy to perform services including but not limited to IV's, physiotherapy, modalities, traction, decompression traction, clothed massage, exercises, laser, and physical therapy/rehabilitation in a group setting. Should you desire a private treatment for and of these therapies, please inform your treating physician. Be advised that this is not always possible as some treatment devices must stay in a fixed place. There will be NO additional cost for private treatment. It is our normal policy to perform some services including but not limited to unclothed or gowned examination and procedures in a private room.

## X-RAYS/MRI/CT SCANS

In conducting normal health care operations and treatment, MILLAR doctors and staff from time-to-time review, open up on computer(s), place in view boxes, discuss and move about the clinic X-Rays, MRIs, and CT Scans disc and films containing same. These films and discs by law have the name of the patient on every film, compact disc, and report. Additionally, in order not to lose or misplace films, the film jacket or compact disc usually also has the name of the patient clearly printed on the outside. These films or disc or computers are often located in a position where other patients seeking care, MILLAR's staff, and third persons who are with patients seeking care can readily see, and have access to, either in person or by name on the film or cd or jacket whose films these belong to. MILLAR in conducting normal health care operations and treatment will provide you, the patient, with a private room where the doctor will give you a closed-door report of imaging findings should you desire. It is your responsibility to request a private room or meeting with the doctor.

## CONTACT BY PHONE OR TEXT - APPOINTMENT REMINDERS - CARDS - NEWSLETTER

MILLAR may, from time to time, contact you to provide information about treatment and treatment options and alternatives or other health-related benefits and services. MILLAR may call or text you by telephone on your cell phone, work phone or home phone. Millar may also call you, text you or e-mail you. We may contact you as an appointment reminder or leave a message on your answering machine or voice mail or with the individual answering the phone. MILLAR may also send mail to you or e-mail you Newsletters, Christmas cards, birthday cards, reminder cards, account payable bills, or information pertinent to your condition, new research, or treatment options or other health information to the mailing address or e-mail address provided by you in our intake form or given to us verbally. It is your responsibility to provide a HIPAA safe and secure phone or e-mail address. If you do not wish to receive contact by phone, text or e-mail you must opt out in writing to MILLAR.

## CALL OUT YOUR NAME

MILLAR may call out your name in the waiting room or in other rooms of the MILLAR clinic when your physician or staff member helping the physician is ready to treat you. It is also possible that they may be able to determine an individual's location within MILLAR's clinic suite from this information.

## **FAMILY/FRIENDS**

MILLAR may disclose to your family members, other relatives, close personal friends, or any other person identified by you, your PHI directly relevant to such person's involvement with your care or the payment for your care. We may also use or disclose your PHI to

notify or assist in the notification (including identifying or locating) a family member, a personal representative, or another person responsible for your care, of your location, general condition or death. However, in both cases, the following conditions will apply:

- (a) If you are present at or prior to the use or disclosure of your PHI, we may use or disclose your PHI if you agree, or if we can reasonably infer from the circumstances, based on the exercise of professional judgment, that you do not object to the use or disclosure.
- (b) If you are not present, we will, in the exercise of professional judgment, determine whether the use or disclosure is in your best interests and, if so, disclose only the PHI that is directly relevant to the person's involvement with your care.

#### **AUTHORIZATION**

Uses and/or disclosures, other than those described above, will be made only with your written Authorization.

#### YOUR RIGHTS You have the right to:

- (a) Revoke any Authorization and/or Consent, in writing, at any time. To request a revocation, you must submit a written request to Dr. Millar (Privacy Officer for MILLAR) or to any of MILLAR's staff members, or
- (b) Request restrictions on certain use and/or disclosure of your PHI as provided by law. However, MILLAR is not obligated to agree to any requested restrictions. To request restrictions, you must submit a written request to any MILLAR staff member. In your written request, you must inform MILLAR of what information you want to limit, whether you want to limit MILLAR's use or disclosure, or both, and to whom you want the limits to apply. If MILLAR agrees to your request, We will for the most part comply with your request restrictions unless the information is needed in order to provide you with emergency treatment.
- (c) Receive confidential communications or PHI by alternative means or at alternative locations. You must make your request in writing to Dr. Millar (Privacy Office for Millar). MILLAR will accommodate all reasonable requests.
- (d) Inspect and copy your PHI as provided by law. To inspect and copy your PHI, you must submit a written request to Dr. Millar or any of MILLAR's staff members. MILLAR can charge you a fee for the cost of copying, mailing or other supplies associated with your request. In certain situations that are defined by law, MILLAR may deny your request, but you will have the right to have the denial reviewed as set forth more fully in the written denial notice.
- (e) Amend your PHI as provided by law. To request an amendment, you must submit a written request to Dr. Millar. You must provide a reason that supports your request. MILLAR may at his discretion deny your request. He may also deny your request if it is not in writing, if you do not provide a reason in support of your request, if the information to be amended was not created by MILLAR (unless the individual or entity that created the information is no longer available), if the information is not part of your PHI maintained by MILLAR, if the information is not part of the information you would be permitted to inspect and copy, and/or if the information is accurate and complete. If you disagree with MILLAR's denial, you will have the right to submit a written statement of disagreement.
- (f) Receive an accounting of disclosures of your PHI as provided by law. To request an accounting, you must submit a written request to the Dr. Millar or any MILLAR staff member. The request must state a time period which may not be longer than the previous six (6) years. The request should indicate in what form you want the list (such as a paper or electronic copy). The first list you request within a twelve (12) month period will be free, but MILLAR may charge you for the cost of providing additional lists. MILLAR will notify you of the costs involved and you can decide to withdraw or modify your request before any costs are incurred.
- (g) Receive a paper copy of this Privacy Notice from MILLAR upon request to Dr. Millar or any MILLAR staff member. (h) Complain to Dr. Millar if you believe your privacy rights have been violated. To file a complaint with MILLAR, send a written compliant with all pertinent information to Dr Millar at PO BOX 21157 Huntsville, Alabama 35813. All complaints must be in writing and mailed to the above post office box.

## HIPPA HITECH

The Health Information Technology for Economic and Clinical Health Act (HITECH Act or "The Act") is part of the American Recovery and Reinvestment Act of 2009 (ARRA).

## (a) Notification of Breach

The HITECH Act now imposes data breach notification requirements for unauthorized uses and disclosures of "unsecured PHI." These notification requirements are similar to many state data breach laws related to personally identifiable financial information (e.g. banking and credit card data). HHS is required to define what "unsecured PHI" means within 60 days of enactment. If it fails to do so then the HITECH definition will control. Under the HITECH Act "unsecured PHI" essentially means "unencrypted PHI." In general, the Act requires that patients be notified of any unsecured breach. If a breach impacts 500 patients or more then HHS must also be notified. Notification will trigger posting the breaching entity's name on HHS' website. Under certain conditions local media will also need to be notified.

#### (b) Joining Networks or using USB devices

You agree, as a patient of MILLAR, not to use a MILLAR computer or attach any device to any MILLAR computer either by USB or other connection or to join any MILLAR network other than the Free Guest WiFi provided without the expressed written consent of MILLAR, which may be withheld for HIPPA purposes. Further you will stop others with you from using or attaching any device to any MILLAR computer or network other than the Free Guest Wifi and you will immediately report to MILLAR

clinic management any person or event where someone attempted to use a MILLAR computer or connect to any MILLAR computer or network other than the Free Guest WiFi.

### (c) EHR system

The Act provides individuals with a right to obtain their PHI in an electronic format (i.e. ePHI). An individual can also designate that a third party be the recipient of the ePHI. The Act provides that only a fee equal to the labor cost can be charged for an electronic request.

## (d) Photographs and Videos

No photographs or videos may be taken in any MILLAR facility without the expressed permission of MILLAR which may be withheld. This includes cell phone pictures and videos. It is a direct violation of HIPPA HITECH to photograph or video other patients being treated at a Millar facility.

#### **HIPAA FAMILY**

The HIPAA Privacy Rule contains several provisions that recognize the integral role that family members, such as spouses, often play in a patient's health care. The HHS Office for Civil Rights issued guidance that addresses the effect of the 2013 Supreme Court decision in *United States v. Windsor* on these provisions, making clear that spouses include both same-sex and opposite-sex individuals who are legally married, whether or not they live or receive services in a jurisdiction that recognizes their marriage.

#### HIPAA DE-IDENTIFICATION REPORTING

The Privacy Rule was designed to protect individually identifiable health information through permitting only certain uses and disclosures of PHI provided by the Rule, or as authorized by the individual subject of the information. However, in recognition of the potential utility of health information even when it is not individually identifiable, §164.502(d) of the Privacy Rule permits a covered entity or its business associate to create information that is not individually identifiable by following the deidentification standard and implementation specifications in §164.514(a)-(b). These provisions require the entity to use and disclose information that neither identifies nor provides a reasonable basis to identify an individual. As required by the Affordable Care Act, Millar is required to report certain De-identified information to CMS-Centers for Medicare and Medicaid Services, the IRS, and other government entities including but not limited to US Department of Health and Human Services.

#### MILLAR'S ADDRESS AND PHONE NUMBER (as Privacy Officer for Millar)

To obtain more information on, or have your questions about your rights answered, you may contact Dr. Millar at (256) 513-4000, or via email at <a href="mailto:drmilar@millarfunctionalmedicine.com">drmilar@millarfunctionalmedicine.com</a>. In this document where it specifically states that you must send request or information to Millar in writing, then please use the following address:

Dr. Gregory B. Millar 2021 Clinton Ave W, Suite A Huntsville, Alabama 35805

#### **MILLAR'S REQUIREMENTS**

MILLAR: (a) Is required by federal law to maintain the privacy of your PHI and to provide you with this Privacy Notice detailing our legal duties and privacy practices with respect to your PHI.

- (b) Is required to maintain a higher level of confidentiality with respect to certain portions of your medical information that is provided for under federal law where state and federal laws conflict, and where state law is more stringent in the area of privacy.
- (c) Is required to abide by the terms of this Privacy Notice.
- (d) Reserves the right to change the terms of this Privacy Notice and to make the new Privacy Notice provisions effective for all of your PHI that it maintains.
- (e) Will distribute any revised Privacy Notice to you prior to implementation.
- (f) Will not retaliate against you for filing a complaint.

EFFECTIVE DATE This Notice is in effect as of January 1, 2025.

Gregory B. Millar (signed electronically 01.01.2025)

Gregory B. Millar, Privacy Officer for MILLAR

Millar 1/01/2025