NOTICE OF PRIVACY PRACTICES

THIS NOTICE DESDCIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THE INFORMATION. PLEASE REVIEW VERY CAREFULY.

This notice describes the privacy practices of Never Surrender.

OUR PLEDGE REGARDING MEDICAL INFORMATION

We understand that medical information about you and your health is personal. We are committed to protecting medical/personal information about you. We create a record of the care and services you receive from our organization. We need this record to provide you with the quality care and to comply with certain legal requirements. This notices applies to all of the medical, personal, and billing records of you care generated by our organization.

This notice will tell you about the ways in which we may use and disclose medical, personal and billing information about you. We also describe your legal rights and certain obligations we have regarding the use and disclosure of your personal information. We are required by law to:

- Make sure that medical, personal, billing information is kept private.
- Provide you this notice of legal duties and privacy practices with respect to information about you; and
- Follow the terms of the notice currently in effect.

HOW WE MAY USE AND DISCLOSE INFORAMTION ABOUT YOU

FOR PAYMENT: We may use and disclosed information about you so that treatment and services you receive on behalf of Never Surrender may be billed to and payment made be made on your behalf by Never Surrender.

FOR TREATMENT: We may use information about you to doctors, nurses, technicians, medical students, and other personnel who are involved in taking care of you.

FOR HEALTH CARE OPERATIONS: We may use and disclose your information about your health care operations.

WHO WILL FOLLOW THIS NOTICE: This notice describes our practices and procedures and that of anyone authorized to enter information into your record, all employees, staff, volunteers, and other practice personnel.

POLICY REGARDING THE PROTECTION OF PERSONAL INFORMATION: We create a record of the care and services that are provided to you on behalf of Never Surrender. We need this record in order to provide you with the quality billing practices and to comply with certain legal requirements. This notice applies to all records of your care at the expense of Never Surrender. Other ways we may use or disclose your protected health information include: as required by law; for health related benefits and services; to individuals involved in you r care or payment for your care; research; to advert a serious threat to health or safety; and for treatment alternative/ Other uses and disclosures of your personal information could include disclosure to or for inmates; law enforcement; military and veterans; national security and intelligence activities; organ and tissue donation; protective services for the President and others; public health risks and workers compensation.

NOTICE OF INDIVIDUAL RIGHTS

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

RIGHT TO ACCOUTNING DISCLOSURES: You have the right to request an "accounting of disclosures". This is a list of all of the disclosures we made of information about you. To request this list you must submit your request in writing to PO Box 1098, Gadsden, AL 35902.

RIGHT TO AMEND: If you feel that the information we have about you is incorrect or incomplete, you may ask for us to amend the information. You have the right to request an amendment for as long as the information is kept by or for this organization. To request an amendment, you request must be in writing and you must provide a reason that supports your request. We may deny your request for amendment.

RIGHT TO INSPECT AND COPY: You have the right to inspect and copy personal information that may be used to provide payment on your behalf made by Never Surrender. We may deny your right to inspect and copy in certain very limited circumstances.

RIGHT TO A PAPER COPY OF THIS NOTICE: You have a right to a paper copy of this notice. You may ask us to give you a copy of this notice at any time.

RIGHT TO REQUEST CONFIDENTIAL COMMUNICATIONS: You have the right to request that we communicate with you about payment/billing matter in a certain way. You must submit your request in writing and specify how you wish to be contacted.

RIGHT TO REQUEST RESTRICTIONS: You have the right to request a restriction or limitation on the information we disclose about you for services received on behalf of Never Surrender. To request restrictions, you must make your request in writing.

CHANGES TO THIS NOTICE: We reserve the right to change this notice. We will post a copy of the current notice on our website. Neversurenderbftc.org

COMPLAINTS: If you believe your privacy rights have been violated, you may file a complaint with the organization. To file a complaint with the office, contact us a t 256-549-0008. All complaints must be submitted in writing. **You will not be penalized for filing a complaint.**

OTHER USES OF PERSONAL INFORMATION: Other uses and disclosures of personal information including medical information not covered by this notice or the laws that apply to use will be made only with your written authorization. If you provided us with permission to use or disclose information about you, you may revoke that permission, in writing, anytime.

If you have any questions about this notice or would like to discuss any issues, please contact us at 256-549-0008.