

## JOINT NOTICE OF PRIVACY PRACTICES

Effective Date: February 6, 2023

**THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE READ IT CAREFULLY.**

This Notice describes the privacy practices of the health care organizations listed below (the "Covered Entities" or "we"). To better serve you, the Covered Entities jointly provide this Notice regarding their privacy practices and your privacy rights established by the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), as amended. The separate health care organizations that participate in this joint Notice each have agreed to follow the terms of this Notice.

This Notice pertains to the following separate health care organizations:

- Pathology Laboratories, Inc. (PathLabs)
- Sonic Healthcare USA, Inc. (Sonic)

The organizations listed above include their respective physicians, technicians, medical staff, phlebotomists, employees, staff, volunteers and other health care personnel authorized to enter information into your medical record or access medical information in your medical record, as applicable. These organizations may share health information with each other for treatment, payment or health care operations purposes as described in this Notice.

### IMPORTANT DISCLAIMER

THE ORGANIZATIONS PARTICIPATING IN THIS JOINT NOTICE ARE PARTICIPATING ONLY FOR THE PURPOSE OF PROVIDING THIS JOINT NOTICE AND SHARING HEALTH INFORMATION AS PERMITTED BY APPLICABLE LAW AND ARE NOT IN ANY WAY PROVIDING HEALTH CARE SERVICES MUTUALLY OR ON EACH OTHER'S BEHALF. EACH ORGANIZATION PARTICIPATING IN THIS JOINT NOTICE IS AN INDIVIDUAL HEALTH CARE PROVIDER AND EACH IS INDIVIDUALLY RESPONSIBLE FOR ITS OWN ACTIVITIES, INCLUDING COMPLIANCE WITH PRIVACY LAWS, AND ALL HEALTH CARE SERVICES EACH RESPECTIVELY PROVIDES.

### You Have the Right to:

- Obtain a copy of your paper or electronic health record
- Ask us to limit the information we share
- Request confidential communication
- Amend your health record
- Obtain a list of those with whom we've shared your information
- Obtain a copy of this privacy notice
- File a complaint if you believe your privacy rights have been violated
- Notification by PathLabs of any changes to our health information practices

## We May Use and Share Your Information to:

- Assist in your treatment: for example, we will report the results of your laboratory test(s) to the health care practitioner who requested the test(s).
- Bill for services rendered to you: for example, a bill may be sent to you or a third party payer. The bill may include information that identifies you and the tests that were performed.
- Manage our organization: for example, we may use information about you to assess the timely reporting of the results of your test(s); this information will then be used in an effort to continually improve the quality and effectiveness of the service we provide.
- We may provide your PHI to other companies or individuals that need the information to provide services to us. These other entities, known as “business associates”, are required to maintain the privacy and security of PHI. For example, we may provide information to companies that assist us with billing our services. We may also use an outside collection agency to obtain payment when necessary.
- Comply with the law; for example:
  1. We may disclose your health information to public health or legal authorities charged with preventing or controlling disease, injury, or disability or to avert a serious threat to the health or safety of a person or the public.
  2. To comply with laws relating to workers compensation or other similar programs established by law.
  3. We may disclose your health information for law enforcement purposes as required by law or in response to a valid subpoena.

## We are Required to:

- Maintain the privacy and security of your health information
  - Under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), PathLabs is required by law to maintain the privacy of health information that identifies you, called protected health information or “PHI”. PathLabs will make every reasonable effort to ensure the confidentiality of your PHI, as required by statute and regulation.
- Inform you if a breach occurs that may have compromised the privacy or security of your information
  - PathLabs is required to provide patient notification if it discovers a breach of unsecured PHI unless there is a demonstration, based on a risk assessment, that there is a low probability that the PHI has been compromised. You will be notified without unreasonable delay and no later than sixty (60) days after discovery of a breach.
- Provide you with a notice of our legal duties and privacy practices regarding the information we collect and maintain about you
  - PathLabs is required to provide you with this notice of our legal duties and privacy practices. A copy of our privacy practices is available on our website, [www.pathlabs.org](http://www.pathlabs.org) . You may also request that a printed copy be mailed to you (please see the “Obtain a copy of this privacy notice” section).
- Abide by the terms of this notice



- PathLabs is required by law to maintain the privacy of your PHI and to abide by all of the terms of this notice.
- Notify you by mail, upon your request, if PathLabs' health information practices change
  - PathLabs may change the content of this notice of privacy practices at any time due to operational or regulatory requirements. The changes will apply to all information PathLabs has about you. Whenever changes are made to this notice of privacy practices, they will be posted on PathLabs' website at [www.pathlabs.org](http://www.pathlabs.org). You may request to be notified by mail when these changes occur. If you wish to have a copy of the changed notice of privacy practices mailed to you, contact PathLabs' Compliance Director by calling (419) 255-4600 / (800) 281-8804.
- Obtain your written authorization for any uses or disclosures of your health information not described in this notice.
  - For purposes not described above, PathLabs will ask for your authorization before using or disclosing your PHI. If you sign an authorization form, you may revoke it, in writing, at any time, except to the extent that PathLabs has already acted on any prior uses or disclosures previously authorized by you.

## To Exercise Your Rights:

- Obtain a copy of your paper or electronic health record
  - You can ask to see or obtain an electronic or paper copy of your laboratory record. Click on the "Patients" box at [www.pathlabs.org](http://www.pathlabs.org) and then on the "Request for Records" line. That will direct you to the REQUEST RECORDS FORM that you will need to complete and submit to obtain your record(s).
  - Upon submission of a REQUEST RECORDS FORM, PathLabs will provide a copy of your laboratory record in the timeframe required by law. You will be informed in writing if the delivery of your record will be delayed.
  - Effective for service dates on and after June 1, 2022, you may also receive your test results through PathLabs' Patient Portal, SonicMyAccess™. Click on the "Patients" box at [www.pathlabs.org](http://www.pathlabs.org) and then on the tab for SonicMyAccess™ for further instruction.
- Ask us to limit the information we share
  - We are allowed to use your health information for treatment, payment and healthcare operations without your consent. You can ask us to limit or not use your information for these purposes, but we are not required by law to agree to your request.
  - If you pay for laboratory services out-of-pocket in full, you can ask us not to share that information with your health insurer. We will agree to your request unless a law requires us to share that information.

If you would like us to limit the information that we share about you, contact PathLabs' Compliance Director by calling (419) 255-4600 / (800) 281-8804 or by sending an email to [ghamel@pathlabs.org](mailto:ghamel@pathlabs.org).

- Request confidential communication
  - You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address that we have on record for you. Generally, we will agree to all reasonable requests.

If you have a request for confidential communication, contact PathLabs' Client Service Department at (800) 281-8804.

- Amend your health record
  - You can ask us to amend health information about you that you think is incorrect or incomplete, but we are not required to agree to your request. You will be notified in writing within 60 days of your request if we do not agree to your request.

If you have a request to amend your health information, contact PathLabs' Client Service Department at (800) 281-8804.

- Obtain a list of those with whom we've shared your information
  - You can ask us to prepare a list for you of the people with whom we have shared your health information within the past six (6) years of your request.
  - We will provide you with a description of the information that we shared, who we shared it with, and why we shared it.
  - Under the law, we are not required to include in the list the occasions that we shared your health information for the purposes of treatment, payment or healthcare operations.
- Obtain a copy of this privacy notice
  - You may obtain a copy of this privacy notice by accessing PathLabs' website at [www.pathlabs.org](http://www.pathlabs.org). Click the "About Us" tab and select Notice of Privacy. Click the "Notice of Privacy" link to download a copy to print. Click on the "print" icon.
  - If you wish to have a copy of this privacy notice mailed to you, contact PathLabs' Compliance Director by calling (419) 255-4600 / (800) 281-8804 or by emailing [ghamel@pathlabs.org](mailto:ghamel@pathlabs.org).
- How to contact us or file a complaint
  - If you have questions or comments regarding PathLabs' Notice of Privacy Practices, or have a complaint about our use or disclosure of your Protected Health Information (PHI) or our privacy practices, please contact PathLabs' Compliance Director by calling (419) 255-4600 / (800) 281-8804 or by emailing [ghamel@pathlabs.org](mailto:ghamel@pathlabs.org).
  - You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting [www.hhs.gov/ocr/privacy/hipaa/complaints/](http://www.hhs.gov/ocr/privacy/hipaa/complaints/). There will be no retaliation by PathLabs toward you or any other person, if a complaint is filed.