



Effective Date: April 14, 2003

251 Keisler Drive Suite 100
Cary, NC 27518

101 Dennis Drive
Sanford, NC 27330

295 Olmsted Boulevard
Mellon Bldg, Suite 12
Pinehurst, NC 28374

NOTICE OF PRACTICE PRACTICES

This notice describes how medical information about you may be used and disclosed and how you can get access to this information.

Sandhills Neurologists, P.A. has a legal duty to protect health information about you. Please review this notice carefully.

If you have any questions or concerns, please ask the Sandhills staff for assistance.

Sandhills Neurologists, P.A. may use and disclose Protected Health Information (PHI) about you:

- o To provide health care treatment
- o To obtain payment for services
- o For health care operations (business operations related to your treatment)

Sandhills Neurologists, P.A. may use and disclose your PHI in other circumstances without your authorization (Examples: federal law, state law, abuse/neglect cases.)

- o Sandhills Neurologists, P.A. may contact you to provide appointment reminders.
- o Sandhills Neurologists, P.A. may contact you with information about treatment, services, products or health care providers. You have rights about your PHI. You can:
 - o Request limits on uses and release of your PHI.
 - o Request different ways to contact you.
 - o See and receive copies of your PHI upon your request.
 - o Request changes to your PHI.
 - o Request a list of disclosures Sandhills Neurologists, P.A. has made.
 - o Request a copy of this notice.
 - o You can object to certain uses and disclosures
 - o You may file a complaint about our privacy practices

Sandhills Neurologists, P.A. may use and disclose your PHI without your authorization in the following circumstances:

1. Sandhills Neurologists, P.A. may use and disclose your PHI to provide health care treatment to you.
2. Sandhills Neurologists, P.A. may use and disclose your PHI to provide, coordinate or manage your health care and related services. This may include communicating with other health care providers regarding your treatment and the coordination and management of your health care with others. For example, we may use and disclose your PHI when you need a prescription, lab work, an x-ray, or other health care services. In addition we may use and disclose your PHI when referring you to another health care provider.

Example 1: Sandhills Neurologists, P.A. may share medical information about you with other facilities such as an imaging service or sleep lab which may provide services that are part of your care.

Example 2: Sandhills Neurologists, P.A. may share medical information about you with another health care provider. For example, if you are referred to another doctor, that doctor will need to know if you are allergic to any medications. Similarly, your doctor may share your PHI with a pharmacy when calling in a prescription.

3. Sandhills Neurologists, P.A. may use and disclose your PHI to obtain payment for services. Generally, Sandhills Neurologists, P.A. may use and give your medical information to others to bill and collect payment for the treatment and services provided to you. Before you receive scheduled services, we may share information about these services with your insurance carrier. Sharing information allows us to ask for coverage under your plan or policy and for approval of payment before we provide services.

Sandhills Neurologists, P.A. may also share portions of your medical information with the following:

- o Billing departments or business offices;
- o Collection departments or agencies;
- o Insurance companies, health plans and their agents which provide you insurance coverage or payment for your health care; Consumer reporting agencies (e.g. credit bureaus.)

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MD

Board Certified in Neurology
Vascular Neurology
Neuromuscular Medicine
Neuroimaging (UNCS)

Giridhar Chintalapudi
MD, FAASM

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Example: Let's say you have sleep apnea. Sandhills Neurologists, P.A. may need to give your health plan(s) information about your condition, equipment or supplies needed and services you received. The information is given to our billing department and your health plan so Sandhills Neurologists, P.A. can be paid or you can be reimbursed.

4. Sandhills Neurologists, P.A. may use and disclose your PHI for health care operations. Sandhills Neurologists, P.A. may use and disclosed PHI in performing business activities, which we call "health care operations". These "health care operations" allow us to improve the quality of care we provide and reduce health care costs. Examples of the way we may use or disclose your PHI for "health care operations" include the following:
 - o Reviewing and improving the quality, efficiency and cost of care that Sandhills Neurologists, P.A. provides to you and our other patients. For example, we may use your PHI to develop ways to assist our health care providers and staff in deciding what medical treatment should be provided to others.
 - o Improving health care and lowering costs for groups of people who have similar health problems and to help manage and coordinate the care for these groups of people. Sandhills Neurologists, P.A. may use PHI to identify groups of people with similar health problems to give them information, for instance about treatment alternatives, classes, or new procedures.
 - o Reviewing and evaluating the skills, qualifications, and performance of health care providers taking care of you.
 - o Providing training programs for students, trainees, health care providers or non-healthcare professionals (for example, billing clerks or assistants) to help them practice or improve their skills
 - o Cooperating with outside organizations that assess the quality of care, Sandhills Neurologists, PA and others provide. The organizations that might include government agencies were accrediting bodies such as the Joint Commission on Accreditation of Healthcare Organizations Cooperating with outside organizations that evaluate, certify or licensed healthcare providers, staff or facilities in a particular field or specialty. For example, Sandhills Neurologists, PA may use or disclose the PHI so that one of our medical assistance or technicians may become certified as having expertise in a specific yield such a sleep medicine.
 - o Assisting various people and review our activities. For example, PHI may be seen by doctors reviewing the services provided to you and by accountants, lawyers, and others who assist us in complying with applicable laws.
 - o Planning for our organization's future operations for the benefit of our organization.
 - o Conducting business management and general administrative activities related to our organization and the services it provides, including providing information.
 - o Resolving grievances within our organization.
 - o Reviewing activities and using or disclosing PHI in the event that Sandhills Neurologists, PA sells our business, property or give control of our business or property to someone else.
 - o Complying with this notice and with applicable laws.
5. Sandhills Neurologist, PA may use and disclose your word PHI under other circumstances without your authorization.
 - o Sandhills Neurologists, PA may use and/or disclose your PHI for a number of circumstances in which you do not have to consent, give authorization or otherwise have an opportunity to agree or object.
 - o Those circumstances include:
 - o When the use and/or disclosure is required by law. For example when a disclosure is required by federal, state or local law or other judicial or administrative proceeding.
 - o When they use and/or disclosure is necessary for public health activities. For example, as Sandhills Neurologists, PA may disclose your PHI if you have been exposed to communicable disease or may otherwise be at risk of contracting or spreading a disease or condition
 - o When the disclosure is related to victims of abuse, neglect or domestic violence.
 - o When the use and/or disclosure is for health oversight activities. For example, Sandhills Neurologists, PA may disclose your PHI to the state or federal health oversight agency which is authorized by law to oversee our operations.
 - o When the disclosure is for judicial and administrative proceedings. For example, Sandhills Neurologists, PA may disclose your PHI in response to an order of a court or administrative tribunal.
 - o When the disclosure is for law enforcement purposes. For example, Sandhills Neurologists, PA may disclose your PHI in order to comply with laws that require the reporting of certain types of wounds or other physical injuries.
 - o When the use and/or disclosure relates to descendants. For example, Sandhills Neurologists, PA may disclose your PHI to a corner or medical examiner for the purposes of identifying you should you die.
 - o When use and/or disclosure relates to cadaver organ, eye or tissue donation purposes.
 - o When the use and/or disclosure relates to medical research. Under certain circumstances, Sandhills Neurologists, PA may disclose your PHI for medicalresearch.
 - o When the use and/or disclosure is to avert a serious threat to health or safety. For example, Sandhills Neurologists, PA may disclose your PHI to prevent or lessen the serious and imminent threat to the health or safety of the person or the public.
 - o When the use and/or disclosure relates to specialized government functions. For example, Sandhills Neurologists, PA may disclose your PHI if it relates to



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military and veterans' activities, national security and intelligence activities, protective services for the president, and medical suitability or determinations of the Department of State.

o When the use and/or disclosure relates to correctional institutions and other law enforcement custodial situations. For example, in certain circumstances,

Sandhills Neurologists, PA may disclose your PHI to correctional institution having lawful custody of you.

6. You can object to certain uses and disclosures. Unless you object, Sandhills Neurologists, PA may use or disclose your PHI in the following circumstances:

o Sandhills Neurologists, PA may share with a family member, relative, friend or other person identified by you, PHI directly related to that person's involvement in your care or payment for your care. We may share with a family member, personal representative or other person responsible for your care. PHI will necessary to notify such individuals of your location, and general condition or death.

o Sandhills Neurologists, PA may share your PHI with a public or private agency (for example, American Red Cross) for disaster relief purposes. Even if you

object, Sandhills Neurologists, PA may still share your PHI, if necessary for the emergency circumstances. If you would like to object to our use or disclosure of your PHI and the above circumstances, please call our Privacy Officer.

7. Sandhills Neurologists, PA may contact you to provide appointment reminders.

o Sandhills Neurologists, PA may use and/or disclose PHI to contact you to provide a reminder to you about an appointment you have for treatment or medical care.

8. Sandhills Neurologist, PA may contact you with information about treatment, services, products or healthcare providers.

o Sandhills Neurologists, PA may use and/or disclose PHI to manage or coordinate your healthcare. This may include telling you about treatment, services, products and/or other healthcare providers. We may also use and/or disclose PHI to give you gifts of a small value. EXAMPLE: to if you are diagnosed with multiple sclerosis we may tell you about pharmaceutical services that may be of interest to you.

****ANY other use or disclosure of your PHI requires your written authorization.****

Under any circumstances other than those listed above, Sandhills Neurologists, PA will ask you for your written authorization before we use or disclose your PHI. If you sign a written authorization allowing us to disclose your PHI in a specific situation, you can later cancel your authorization in writing. If you cancel your authorization in writing, we will not disclose your PHI after we receive your cancellation, except for disclosures which are being processed before we receive your cancellation.

You have several rights regarding your PHI.

o You have the right to request that Sandhills Neurologists, PA restrict the use and disclosure of your PHI. We are not required to agree to your requested restrictions. However, even if we agree to your request, in certain situations you restrictions at may not be followed. These situations include emergency treatment, disclosures to the Secretary of the Department of Health and Human Services, and uses and disclosures described in subsection 4 on the previous section of this Notice. You may request a restriction by contacting the Sandhills Neurologists, PA Privacy Officer in writing. You have the right to request how and where Sandhills Neurologists, PA contact you about PHI. Your request must be in writing to the Sandhills Neurologists, PA Privacy Officer. For example, you may request that Sandhills Neurologists, PA contact you at your work address or phone number or by e-mail. We must accommodate reasonable requests, but, may condition that accommodation on your providing us with information regarding how payment (if any) will be handled in your specification of an alternative address or other method of contact.

You may request alternative methods of communication by contacting the Sandhills Neurologists, PA Privacy Officer in writing.

o You have the right to request to see and receive a copy of PHI contained in clinical, billing and other records used to make decisions about you. Your request must be in writing. We may charge you related fees. Instead of providing you with a full copy of the PHI, we may give you a summary or explanation of your PHI, if you agree in advance to the form and cost of the summary or explanation. There are certain situations in which we are not required to comply with your request. Under these circumstances, we will respond to you in writing, stating why we will not grant your request and describing any rights you may have to request a review of our denial.

You may request to see and receive a copy of PHI about you contacting the Sandhills Neurologists, PA Privacy Officer in writing.



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o You have the right to request that the Sandhills Neurologists, PA make amendments to clinical, billing and other records used to make decisions about you. Your request must be in writing and must explain your reasons for the amendment. We may deny your request if:

1. the information was not created by us (unless you prove the creator of the information is no longer available to amend the record);
2. the information is not part of the records used to make decisions about you;
3. we believe the information is correct and complete; or
4. in those circumstances described in the previous underlined section. We will tell you in writing the reasons for the denial and describe your rights to give us a written statement disagreeing with the denial. If we accept a request to amend the information, we will make reasonable efforts to inform others of the amendment, including persons, you name who have received your PHI and who need the amendment. You may request an amendment of your PHI by contacting the Sandhills Neurologists, PA Privacy Officer in writing. If you asked our Privacy Officer in writing, you have the right to receive a written list of our disclosures of your PHI. You may ask for disclosures made up to six years before your request (not including disclosures made prior to April 14, 2003). We are not required to include disclosures, For your treatment For billing and collections of payment for your treatment for our healthcare operations Requested by you, that you authorized, or which are made to individuals involved in your care Allowed by law, but when the use and/or disclosure relates a certain specialized government functions or relates to correctional institutions and in other law-enforcement custodial situations. As part of a limited set of information which does not contain certain information which would identify you. The list will include the date of the disclosure, the name and address, if available of the person or organization receiving the information, a brief description of the information disclosed, and the purpose of the disclosure. If you request a list of disclosures more than once in 12 months, we can charge you a reasonable fee.

You may request a listing of disclosures by contacting the Sandhills Neurologists, PA Privacy Officer in writing.

o You have the right to a copy this notice. You have the right to request a paper copy of this notice at any time by contacting the Sandhills Neurologists, PA.

Privacy Officer in writing. Sandhills Neurologists, PA will provide a copy of this notice no later than the date you first receive services from us (except for emergency services, and then Sandhills Neurologists, PA will provide notice to you as soon as possible).

You may file a complaint about our privacy practices. If you think your privacy rights have been violated by us, or have a complaint about a privacy practices, you can contact the person listed below:

Sandhills Neurologists, PA
Attn: Privacy Officer
295 Olmsted Blvd., Suite 12
Pinehurst, NC 283741
910-235-0595

If you file a complaint, Sandhills Neurologists, PA will not take any action against you or change our treatment of you in any way. You may also send a written complaint to the United States Secretary of the Department of Health and Human Services.

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