

## 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.**

This Notice describes the privacy practices of New Discovery Laboratories (the "Covered Entities" or "we"/ "us"), which 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.

#### 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 New Discovery Labs 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).
- Appointment reminders: We may use and disclose protected health information to contact you to provide appointment reminders.
- 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), New Discovery Labs is required by law to maintain the privacy of health information that identifies you, called protected health information or "PHI". New Discovery Labs 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
  - New Discovery Labs 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
  - New Discovery Labs 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.newdiscoverylabs.com](http://www.newdiscoverylabs.com). 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
  - New Discovery Labs 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 New Discovery Labs’ health information practices change
  - New Discovery Labs 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 New Discovery Labs has about you. Whenever changes are made to this notice of privacy practices, they will be posted on New Discovery Labs’ website at [www.newdiscoverylabs.com](http://www.newdiscoverylabs.com). 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 New Discovery Labs’ Privacy Officer by calling 443.721.6323x100.
- Obtain your written authorization for any uses or disclosures of your health information not described in this notice.
  - For purposes not described above, New Discovery Labs 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 New Discovery Labs 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. Your lab results are also accessible in your Patient Portal account in a printable PDF format. The Patient Portal can be accessed from our website: [www.newdiscoverylabs.com](http://www.newdiscoverylabs.com).
  - We 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.
- 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 New Discovery Labs’ Privacy Officer by calling 443.721.6323x100 or by sending an email to [privacy@newdiscoverylabs.com](mailto:privacy@newdiscoverylabs.com).

- 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 New Discovery Labs at 443-721-6323.

- 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 New Discovery Labs at 443-721-6323.

- 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 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 New Discovery Labs' website at [www.newdiscoverylabs.com](http://www.newdiscoverylabs.com). Click the "About Us" tab and select Notice of Privacy. Click the "Notice of Privacy" link to download a copy to print.
  - If you wish to have a copy of this privacy notice mailed to you, call New Discovery Labs support line (443-721-6323).
- How to contact us or file a complaint
  - If you have questions or comments regarding New Discovery Labs' 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 New Discovery Labs' Privacy Officer by calling 443-721-6323x100 or by emailing [privacy@newdiscoverylabs.com](mailto:privacy@newdiscoverylabs.com)
  - 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 New Discovery Labs toward you or any other person, if a complaint is filed.

Effective Date: 11/15/2020