



July 2, 2025

Privacy Policy

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

Uses and Disclosures

The following categories describe the different ways in which we may use and disclose your individually identifiable information, unless you object.

Treatment

Your health information may be used by staff members or disclosed to other health care professionals for the purpose of evaluating your health, diagnosing medical conditions, and providing treatment. For example, results of laboratory tests and procedures will be available in your medical record to all health professionals who may provide treatment or who may be consulted by staff members. Additionally, we may disclose your health information to others who may assist in your care. This includes other healthcare providers, your spouse, partner, children or parents.

Payment

Your health information may be used to bill and collect payment for the services and items you may receive from us.

Health Care Operations

Your health information may be used to support the day to day activities and management of Magnolia Medicine. For example, information on the services you received may be used to support budgeting and financial reporting, to develop protocols and clinical guidelines, and to aid in credentialing, legal services and insurance.

Appointment reminders

Magnolia Medicine will use your health information to contact you and send appointment reminders.

Information about treatments

Your health information may be used to send information that you may find interesting on the treatment and management of your medical condition.

Law enforcement

Your health information may be disclosed to law enforcement agencies to support government audits and inspections, to facilitate law enforcement investigations, and to comply with government-mandated reporting.

Release of information to family/friends

With written consent, Magnolia Medicine may release your health information to a friend or family member who is involved in your care or in the case of an emergency.

Patient mass communication

We may use your name, email address, or text number to contact you with bulk messages, such as newsletters or clinic schedule updates.

Other uses and disclosures in special circumstances

- Public health risks- communicable diseases, reporting reactions to drugs or vaccines, problems with products or devices, abuse or neglect
- Lawsuits and similar proceedings-May use or disclose in response to a court or administrative order, if you are involved in a lawsuit or similar proceeding in response to a discovery request, subpoena, or other lawful process.
- Deceased patients- it may be required to release information to a medical examiner or coroner.
- Organ and tissue donation
- Serious threats to health and safety
- National security
- Inmates
- Military- if the appropriate authorities require information
- Worker's compensation

Disclosures of your health information or its use for any purpose other than those listed above require your specific written authorization.

Your Rights

You have certain rights under the federal privacy standards. These include:

- The right to request restrictions on the use and disclosure of your protected health information for treatment, payment, or healthcare operations. You have the right to restrict our disclosure to only specific individuals involved in your care or the payment for your care, such as family members and friends. We are not required to agree to your request; however, if we do not agree, we are bound by our agreement except when otherwise required by law, in emergencies, or when the information is necessary to treat you. You must make your request in writing to the attention of the Privacy Officer. Your request must be described clearly and concisely; a) the information you wish restricted; b) whether you are requesting to limit our practices, use, disclosure, or both; c) to whom you want the limits to apply.
- The right to receive confidential communications concerning your medical condition and treatment.
- The right to inspect and copy your protected health information. We will provide a copy or summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee. Our practice may deny your request to inspect and/or copy in certain limited circumstances; however, you may request a review of denial.
- The right to amend or submit corrections to your protected health information. This request must be made in writing and submitted to the Privacy Officer with reasons to support your request. We may deny your request if you ask to amend information that is in our opinion: accurate and complete, not part of the health information kept by or for the practice, not part of the health information which you are permitted to inspect and copy, or not created by our practice. We will provide a written explanation of our denial in 60 days.
- The right to receive an accounting of how and to whom your protected health information has been disclosed. We will include all disclosures except for those about treatment, payment, and health care operations and certain other disclosures. We will provide one accounting a year for free, but will charge a reasonable, cost-based fee if you ask for another disclosure within 12 months.
- The right to receive a printed copy of this policy.

Requests to Inspect Protected Health Information

You may inspect or copy the protected health information that we maintain. As permitted by federal regulation, we require that requests to inspect or copy protected health information be submitted in writing. Your request will be reviewed and will generally be approved unless there are legal or medical reasons to deny the request.

Magnolia Medicine's Duties

We are required by law to maintain the privacy of your protected health information and to provide you with this notice of privacy practices. We also are required by the privacy policies and practices outlined in this document.

Right to Revise Privacy Practices

As permitted by law, we reserve the right to amend or modify our privacy policies and practices. These changes in our policies and practices may be required by changes in the federal and state laws and regulations. Upon request, we will provide you with the most recently revised notice on any office visit. The revised policies and practices will be applied to protect all health information we maintain.

Complaints

If you believe that your privacy rights have been violated, you should call the matter to our attention by sending a letter describing the cause of your concern. You will not be penalized or otherwise retaliated against for filing a complaint.