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 of Privacy Practices describes how Shodair may use and disclosure your protected health information to carry out treatment, payment, or health care operations and for other purposes permitted or required by law. It also describes your rights to access and control your protected health information. Protected health information is information about you including demographic information that may identify you and that relates to your past, present, or future physical or mental health and related health care services.

YOUR HEALTH INFORMATION RIGHTS

Although your health record is the physical property of Shodair Hospital, the information belongs to you. You have the right to:

- Request a restriction on certain uses and disclosures of your protected health information. Shodair Hospital will honor your request for restrictions to the extent possible but is not required to agree to the request.
- Obtain a paper copy of the Notice of Privacy Practices upon request.
- Inspect and obtain a copy of your protected health information and billing information upon written request within 30 days of the request.
- Information held electronically will be provided in electronic form if requested by the patient and if it is readily producible in electronic form.
- Request amendment of your protected health information and billing information in writing.
- Obtain an accounting of disclosures of your protected health information upon written request.
- Request confidential communication of your protected health information by alternative means or at alternative locations.
- At any time, revoke in writing your authorization to use or disclose protected health information except to the extent that action has already been taken in reliance on the authorization or as otherwise limited by law.
- Our patients have a right to a restriction to disclosure of PHI to a health plan for payment if the patient has paid in full for the services and items provided in that visit.
- Our patients have the right to agree or object to participation in a facility directory. **Note:** Shodair does not utilize a facility directory.
- Our patients have the right to agree or object to the disclosure of protected health information to a family member, legal guardian, personal representative, or close personal friend of the patient, to the extent the protected health information is relevant to the individual's involvement in the patient's care or payment related to that care. If

the patient is not able to agree or object due to the patient's incapacity or an emergency circumstance, health professionals, using their best judgment, will decide whether a limited disclosure related to the individual's care of the patient is in the best interests of the patient.

SHODAIR HOSPITAL IS REQUIRED TO

- Maintain the privacy of your protected health information.
- Provide you with a notice as to our legal duties and our privacy and security practices with respect to protected health information we collect and maintain about you.
- Abide by the terms of our Notice of Privacy Practices.
- Notify you if we agree to a requested restriction.
- Accommodate reasonable requests you may have to communicate confidential protected health information by alternative means or at alternative locations.
- Obtain your written authorization to use or disclose your protected health information in situations other than those described in this notice or otherwise authorized by law.
- Notify you in case of a breach of your unsecured protected health information when it has been or is reasonably believed to have been accessed, acquired, used or disclosed in violation of privacy or security regulations.

Shodair Hospital participates in an electronic Health Information Exchange (HIE) through Big Sky Care Connect (BSCC) as a means to improve the quality of your health and healthcare experience. HIE provides us with a way to securely and efficiently share patients' clinical information electronically with other physicians and healthcare providers that participate in the HIE network. Using HIE helps your healthcare providers to more effectively share information and provide you with better care. The HIE also enables emergency medical personnel and other providers who are treating you to have immediate access to your medical data that may be critical for your care. Making your health information available to your healthcare providers through the HIE can also help reduce your costs in a variety of ways, such as eliminating unnecessary duplication of tests and procedures.

Patients can opt-out of participation in the HIE at any time through either of the methods described below. Patients can also opt back in at any time using the same methods. Shodair Hospital will not use your decision, whatever it may be, as a condition of receiving treatment.

Opting out means your data will still be shared with BSCC, but your health data will not be viewable or accessible in the BSCC system. Opting out of the HIE is an "all-or-nothing" choice, because BSCC cannot block access to some types of medical information while at the same time permit access to other medical information.

Opt-Out Methods:

1) Patient to complete the opt-out form available on BSCC's website at https://www.mtbscc.org/bscc-patients and mail it to BSCC opt-out Team @ 2021 11th Avenue, Suite 11 Helena, MT 59601
2) Complete opt-out Form online and submit it directly on BSCC's website: https://www.mtbscc.org/opt-out.

Shodair Hospital reserves the right to change this notice. We reserve the right to make the revised or changed notice effective for protected health information we already have about you as well as any information we receive in the future. We will place a copy of the current

notice in the hospital. The notice will contain the effective date. In addition, each time you register at or are admitted to the hospital for treatment or health care services, we will offer you a copy of the current notice in effect. Shodair Hospital may also revise its policy and procedures regarding the use and disclosure of protected health information at any time, which could subsequently result in additional uses or disclosures that would not require an individual's authorization.

USES AND DISCLOSURES FOR TREATMENT, PAYMENT, AND HEALTH CARE OPERATIONS

Shodair Hospital may use and disclose your protected health information without authorization for certain purposes, such as treatment, payment and health care operations. The following examples of these uses and disclosures are not meant to be exhaustive but are included to give you an idea of when your protected health information could be disclosed.

Shodair Hospital will use your health information for treatment. For example, information obtained by a nurse, physician, or other member of your health care team will be recorded in your record and used to determine the course of your treatment. Your physician will document in your record his or her expectations of the members of your health care team. Members of your health care team will then record the actions they took and their observations. In that way, the physician will know how you are responding to treatment. Shodair Hospital will also provide your physician or subsequent healthcare provider with copies of various reports that will assist him or her in treating you once you are discharged.

Shodair Hospital will use your health information for payment. For example, Shodair will send a bill to you and/or your insurance company. The information on or accompanying the bill may include information that identifies you, as well as your diagnosis, procedures, and supplies used. Information can be disclosed to a plan sponsor for plan administration. Genetic information cannot be used to decide whether coverage can be given or at what price.

Shodair Hospital will use your health information for regular health care operations. For example, members of the medical staff or the departments that provided your care may use information in your health record to assess the care and outcomes in your case and others like it. This information will then be used in an effort to continually improve the quality and effectiveness of the health care and service we provide.

Shodair Hospital will use your health information for treatment, payment and health operations of other covered entities. For example, we may release information to your physician so that he or she may send a bill to you and/or your insurance company. In addition, Shodair may provide your physician or referring hospital with information required to perform quality improvement, peer review, compliance review and medical education.

OTHER USES AND DISCLOSURES

Shodair Hospital may also use and disclosure your protected health information without authorization for the following purposes:

Abuse or Neglect: We may disclose your protected health information to a public health agency authorized by law to receive reports of child abuse or neglect. In addition, we may disclose protected health information if we believe that you have been a victim of abuse, neglect, or domestic violence to a governmental entity or agency authorized to receive such information.

In this case, the disclosure is made consistent with the requirements of applicable federal and state laws.

Business Associates: There are some services provided in our organization through contracts with business associates. For example, we may release information to an organization that processes billing claims electronically for our business office. When these services are contracted, we may disclose your protected health information to the business associate so that they can perform the job we've asked them to do and bill you or your insurance company for services rendered. To protect your health information, we require the business associate to appropriately safeguard your information.

Communicable Diseases: We may disclose your protected health information, if authorized by law, to a person who may have been exposed to a communicable disease or may otherwise be at risk of contracting or spreading the disease or condition.

Communicating appointment reminders and health care alternatives: We may contact you to provide appointment reminders or provide you with information about treatment alternatives or other health-related benefits and services that may be of interest to you.

Coroners, Funeral Directors: We may disclose protected health information to coroners or medical examiners for identification purposes to determine cause of death, or for the performance of other duties as authorized by law. We may also disclose protected health information to funeral directors consistent with applicable law to enable them to carry out their duties.

Food and Drug Administration (FDA): We may disclose your protected health information to a person or company required by the FDA to report adverse events, product defects or biologic product deviations; to track FDA- regulated products; to enable product recalls, repairs, replacement or to locate and tell individuals about recalled or withdrawn products; or to conduct post-marketing surveillance.

Fundraising: We may contact you as part of our fundraising efforts, or your name and address may be used to send you a newsletter about our services. We may also contact you to request a tax-deductible contribution to support important activities at Shodair Hospital. In connection with any fundraising, we may disclose to our fundraising staff your name, address, age, gender, date of birth, the hospital program providing services, your provider's name, and the days when you received care here. You may opt out of any fundraising activity and Shodair Hospital will not condition treatment or payment on whether an individual opts out of a fundraising activity.

Marketing: We may use or disclose your health information to identify health-related services and products that may be beneficial to your health and we may contact you about these services and procedures. [All marketing requires authorization, except face-to-face communication or a promotional gift of a nominal value].

Health Oversight: We may disclose protected health information to a health oversight agency for activities authorized by law, such as audits, investigations, and inspections. Oversight agencies seeking this information include government agencies that oversee the health care system, government benefit programs, other government regulatory programs and civil rights laws.

Law Enforcement: We may disclose your protected health information to law enforcement if (1) you are a victim of a crime; (2) it is required by law: (3) it is necessary to identify and locate a suspect, fugitive, witness, or missing person; (4) the protected health information constitutes evidence of criminal conduct that occurred on Shodair Hospital's premises; (5) a death occurs as a result of a crime; or (6) there is a medical emergency (not on Shodair Hospital's premises) and it is likely that a crime has occurred.

Legal Proceedings: We may disclose protected health information during any judicial or administrative proceeding, in response to an order of a court or administrative tribunal (if such a disclosure is expressly authorized), and in certain conditions in response to a subpoena, discovery request or other lawful process.

Organ Procurement: Protected health information may be used and disclosed for cadaveric organ, eye or tissue donation purposes.

Public Health: As required by law, we may disclose your protected health information to public health or legal authorities charged with preventing or controlling disease, injury, or disability.

Psychotherapy Notes: Shodair will disclose psychotherapy notes only if Shodair has received an authorization, except in limited cases involving treatment, payment, or health care operations.

Research: We may disclose your protected health information to researchers when their research has been approved by an Institutional Review Board that has reviewed the research proposal and protocols to ensure the privacy of your protected health information.

Sale of Protected Health Information: Shodair must obtain an authorization before selling any protected health information.

Threat to Public: We may disclose your protected health information if it is necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public or if it is necessary for law enforcement authorities to identify or apprehend an individual.

Workers' Compensation: We may disclose your protected health information to comply with laws relating to Workers' Compensation or other similar programs established by law.

Special Privacy Protections for Substance Use Disorder Records: Certain records related to substance use disorder diagnosis, treatment, or referral for treatment are protected by **42 CFR Part 2**, a federal law that provides additional privacy protections beyond HIPAA.

Federal law prohibits unauthorized disclosure of substance use disorder records.

Disclosure of these records is permitted only with your written consent or as otherwise permitted by 42 CFR Part 2. Federal law permits limited disclosures of substance use disorder records without your consent in specific circumstances, including medical emergencies, research, audits or evaluations, and court orders that meet federal requirements.

Recipients of this information may not re-disclose it unless permitted by federal law.

Substance use disorder records shall not be used or disclosed in civil, criminal, or administrative, or legislative proceedings against the patient unless based on written consent, or a court order

with documented notice to the patient. A court order authorizing use or disclosure must be accompanied by a subpoena or other legal requirement compelling disclosure before the requested PHI is used or disclosed as required per 42 CFR §2.22.

When substance use disorder records are involved, 42 CFR Part 2 controls even if HIPAA would otherwise permit disclosure.

Other Uses: Shodair will obtain your authorization for any use or disclosure of protected health information not described in this Notice.

If you have any questions about this notice, please contact our Privacy Officer at (406) 444-7540. If you believe your privacy rights have been violated, you can contact our Privacy Officer at the above number for information about how to file a complaint. You may also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by visiting ocrportal.hhs.gov. Shodair Hospital prohibits retaliation against any individual filing a privacy complaint.

Effective Date: February 16, 2026