Privacy Practices and Patient Notices

Drury Primary Care

Effective date: July, 2026

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.

Your rights

Contact our Privacy Official below to make a request. An authorized personal representative may act for you as permitted by law.

- **Records:** You may inspect or obtain a paper or electronic copy of your medical and billing records and other information in our designated record set.
- **Corrections:** You may ask us to amend incorrect or incomplete information. If we deny your request, we explain why in writing and how you may disagree.
- **Private communications:** You may request contact in a particular way or at another location. We accommodate reasonable requests.
- **Restrictions:** You may ask us to limit uses or disclosures for treatment, payment, or healthcare operations. We generally do not have to agree. If a service is paid in full out of pocket and you request it, we must withhold information about that service from your health plan for payment or healthcare operations unless disclosure is required by law.
- **Disclosure list:** You may request an accounting of certain disclosures during the previous six years. This excludes treatment, payment, healthcare operations, disclosures you authorized, and other legally excluded disclosures.
- **Paper notice:** You may request a paper copy of this notice, even if you received it electronically.

Questions and complaints

To exercise your rights or file a privacy complaint, contact:
Privacy Official, Drury Primary Care
Phone: (239) 497 3663
Email: eileen@druryprimarycare.com

You may also complain to the U.S. Department of Health and Human Services Office for Civil Rights at www.hhs.gov/hipaa/filing-a-complaint/index.html. We will not retaliate against you for filing a complaint.

How we use and share health information

- **Treatment:** We use and share information to provide and coordinate care, such as sharing your medication list with another treating provider.
- **Payment:** We use and share information to obtain payment, such as sending visit information to your insurer for a claim.
- **Healthcare operations:** We use and share information to run our practice, such as reviewing records to evaluate care quality.
- **People involved in your care:** With your agreement or an opportunity to object, we may share relevant information with people involved in your care or payment, or for disaster relief. If you cannot express your wishes, we may share relevant information when our professional judgment indicates it is in your best interest.
- **Other lawful disclosures:** Subject to legal conditions, we may share information for public health reporting and safety; suspected abuse or neglect; health oversight; research; organ or tissue donation; coroners, medical examiners, or funeral directors; workers' compensation; law enforcement; legal proceedings; and authorized military, national security, or correctional purposes. We disclose information when required by law, including to HHS for compliance reviews.
- **Special protections:** We follow stricter federal and Florida privacy laws when applicable. HIV test results generally require specific written authorization unless Florida law permits or requires disclosure. Additional protections may apply to mental health and genetic information.
- **Protected substance use disorder records:** If we receive records protected by 42 CFR Part 2, they cannot be used or disclosed in proceedings against you without your written consent or a qualifying court order accompanied by a subpoena or other legal requirement. For example, a routine police request alone does not permit disclosure for a proceeding against you.

Written permission

Most uses or disclosures of psychotherapy notes, marketing uses, and sales of health information require your written authorization. Uses and disclosures not described in this notice also require your written authorization. You may withdraw authorization in writing, except where we have already relied on it.

Information disclosed to a recipient may be shared again and may no longer be protected by HIPAA. Other laws may still protect it.

Our duties

We must protect your health information, provide this notice, follow the notice currently in effect, and notify you when a breach of unsecured protected health information requires notification.

We may change this notice and apply revised terms to all information we maintain. The revised notice will show its effective date and be available at druryprimarycare.com and upon request.

Good Faith Estimate Notice

You have the right to receive a Good Faith Estimate explaining how much your healthcare will cost.

- **Who may receive an estimate:** If you do not have qualifying health coverage, or are not using qualifying coverage to pay for your care, you may request a written estimate of expected charges before receiving services.
- **What it includes:** The total expected cost of healthcare items and services, including related costs such as tests, prescription drugs, equipment, and hospital fees.
- **When scheduling:** If you schedule care 3 to 9 business days ahead, we provide the estimate within 1 business day after scheduling. If you schedule at least 10 business days ahead, we provide it within 3 business days after scheduling.
- **Before scheduling:** You may ask for an estimate before making an appointment. We provide it within 3 business days after your request.
- **If your bill is higher:** If any provider or facility bills you at least $400 more than its estimate, you may dispute the bill through the federal patient and provider dispute resolution process. You must start that process within 120 calendar days of the initial bill. Keep a copy of your estimate and bill.

Questions or requests

Drury Primary Care
Phone: (239) 497 3663
Email: eileen@druryprimarycare.com

For federal information or help with a dispute:
www.cms.gov/nosurprises/consumers
Phone: 1 800 985 3059
Email: FederalPPDRQuestions@cms.hhs.gov

Nondiscrimination and Communication Assistance

- **Equal access:** Drury Primary Care complies with applicable federal civil rights laws and does not discriminate, exclude people, or treat people less favorably because of race, color, national origin (including limited English proficiency and primary language), sex, age, or disability.
- **Disability assistance:** We provide reasonable accommodations, including reasonable modifications and appropriate communication aids and services, free of charge and in a timely manner when needed for accessible care and equal participation. These may include qualified sign language interpreters and information in large print or other accessible formats.
- **Language assistance:** We provide language assistance free of charge and in a timely manner when needed for meaningful access. This includes qualified interpreters, oral translation, and written or electronic translated information.
- **Request help:** Call (239) 497 3663, email eileen@druryprimarycare.com, or speak with your provider. Tell us the assistance you need.

Questions and complaints

If you believe we have discriminated or failed to provide these services, contact Drury Primary Care at the phone number or email above. We will not retaliate against you for making a complaint.

You may also file a civil rights complaint with the U.S. Department of Health and Human Services Office for Civil Rights:

- **Online:** https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf
- **Mail:** 200 Independence Avenue SW, Room 509F, HHH Building, Washington, DC 20201
- **Phone:** 1 800 368 1019 • TDD: 1 800 537 7697

Complaint forms: www.hhs.gov/ocr/complaints/index.html
This notice is available at druryprimarycare.com.

Free Communication Assistance

If you speak a language other than English, free language assistance services are available. Appropriate aids and services to provide information in accessible formats are also available free of charge. Call (239) 497 3663 or speak with your provider.

Lighthouse for blindness & Vision Loss Collier County provides resources at no cost including OCR text-to-speech technology, Screen Readers and Magnification Portals, etc. They can be reached at (239) 430-3934. Lighthouse of SWFL Lee County (239) 997-7797.