



## COMPASSIONATE KIDNEY CARE INC.

7351 W. Oakland Park Blvd Suite 105 | Lauderhill, FL 33319-7107 | Phone: 954-908-5992

# 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 THIS NOTICE CAREFULLY

Compassionate Kidney Care Inc. is required to follow specific rules on maintaining the privacy and confidentiality of your protected health information (PHI), using your information, and disclosing or sharing this information with other healthcare professionals involved in your care and treatment. This Notice describes your rights to access and control your PHI. It also describes how we use and disclose your PHI to provide treatment, obtain payment for services, manage our healthcare operations, and for other purposes permitted or required by law.

PHI is information about you — including demographic information such as your name, address, phone number, and email address — that may identify you and relates to your past, present, or future physical or mental health condition and related healthcare services.

## SECTION 1: YOUR RIGHTS UNDER THE PRIVACY RULE

### Right to Receive This Notice

You have the right to receive a copy of this Notice of Privacy Practices. We are required to follow the terms of this notice. We reserve the right to change the terms of our notice at any time. A revised Notice will be available in our office, on our website, and provided to you upon request.

### Right to Authorize Other Use and Disclosure

You have the right to authorize any use or disclosure of PHI not specified in this notice. We would need your written authorization to use your PHI for marketing purposes, for most disclosures of psychotherapy notes, or if we intended to sell your PHI. You may revoke an authorization in writing at any time.

### Right to Inspect and Copy Your PHI

You may inspect and obtain a copy of your complete health record, including in electronic format if your record is maintained electronically. We will provide a copy or summary usually within 30 days of your request. A reasonable fee may apply.

### Right to Request Restrictions

You may ask us in writing not to use or disclose any part of your PHI for treatment, payment, or healthcare operations. You also have the right to request that we restrict communication to your health plan regarding a specific treatment or service that you paid for in full, out of pocket. We are not permitted to deny this specific type of restriction request.

### Right to Request an Amendment

You may request an amendment to your PHI if you feel it is incorrect or incomplete. We may deny your request in certain circumstances.

### Right to Request Alternative Communication

You have the right to ask us to contact you about medical matters using an alternative method or address. We will follow all reasonable requests.

### Right to a Disclosure Accountability

You may request a listing of disclosures we have made of your PHI to entities or persons outside of our office.

### Right to a Privacy Breach Notice

You have the right to receive written notification if the practice discovers a breach of your unsecured PHI and determines through a risk assessment that notification is warranted.

 **I have read and understand my rights under the Privacy Rule.** Initials: \_\_\_\_\_

## SECTION 2: HOW WE MAY USE OR DISCLOSE YOUR PROTECTED HEALTH INFORMATION

### Treatment

We may use and disclose your PHI to provide, coordinate, or manage your healthcare and any related services. This includes sharing your PHI with other healthcare providers, specialists, pharmacies, laboratories, imaging centers, and hospitals involved in your care.

### Payment

Your PHI will be used as needed to obtain payment for your healthcare services, including determining eligibility, processing claims, and communicating with your insurance plan.

### Healthcare Operations

We may use or disclose your PHI to support the business activities of our practice, including quality assessment and improvement, medical review, legal services, auditing functions, and patient safety activities.

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### Patient Portal — Elation Health

We use a secure patient portal through Elation Health, our electronic health record provider. Through the portal you may access portions of your medical record, receive appointment reminders, review test results, and receive educational materials and communications from our practice. Please be aware of the following:

- All information you submit through the portal, including messages and forms, may become part of your permanent medical record.
- The portal is not monitored 24 hours a day and is not appropriate for urgent or emergency communications. For emergencies, call 911.
- Elation Health is a Business Associate of our practice and has signed a Business Associate Agreement (BAA) requiring them to protect the privacy and security of your PHI.
- We may use the portal to send you appointment reminders, care-related communications, and educational materials relevant to your treatment.
- You may opt out of portal communications by notifying our office in writing.

### Health Information Exchange (HIE) and TEFCA

Our practice and/or our electronic health record system may participate in Health Information Exchanges (HIEs) and the Trusted Exchange Framework and Common Agreement (TEFCA) — the federal framework that allows different health networks to securely share patient information electronically. This means:

- Your medical information may be shared electronically with other treating providers, hospitals, or healthcare facilities involved in your care through these networks.
- This sharing occurs for treatment, payment, and healthcare operations purposes and does not require your separate authorization.
- If you wish to opt out of participation, you may submit a written request to our HIPAA Compliance Officer. Please note that opt-out processes are managed at the network level and may vary depending on the exchange. Our office will assist you with available options upon request.
- Opting out may limit our ability to access external medical records that could be important for your care.

### Appointment Reminders and Health Communications

We may use and disclose your PHI to contact you regarding scheduled appointments, treatment options, and health-related services. You have the right to opt out of such communications by written request.

### Telehealth Services

This practice provides healthcare and educational services using telehealth platforms. Video or audio files, images, output data from medical devices, and patient portal services may be recorded and stored in our EHR for further evaluation, analysis, and documentation purposes. These services incorporate network and software security protocols to protect the confidentiality and integrity of your information.

### Lab Results — Review Policy

Laboratory results, diagnostic tests, and imaging reports are reviewed by your provider in the context of your overall clinical condition and treatment plan. In most cases, **results will be communicated during a scheduled office visit** with your provider. Our practice does not routinely provide detailed interpretation of laboratory results by phone, email, or portal messaging, as this may not allow for a complete or accurate clinical assessment. This policy ensures that all results are properly contextualized and that you receive appropriate clinical guidance.

If results are significantly abnormal or require urgent medical attention, our office will make reasonable efforts to contact you directly.

Not all results will receive separate notification if they are within expected or stable ranges.

If you receive notification that results are available in your patient portal, please schedule an office visit to review them with your provider.

If you miss or cancel your appointment, you are responsible for rescheduling to review your results and ongoing care plan.

### Insurance Records Requests and Third-Party Contractors

Compassionate Kidney Care Inc. regularly receives requests for patient medical records from insurance companies, health plans, and authorized third-party contractors acting on behalf of these entities. These requests may include but are not limited to: insurance claim processing, utilization review, prior authorization support, independent medical examinations (IME), Medicare and Medicaid audit reviews, workers' compensation claims, and disability determination reviews.

We may disclose your PHI in response to such requests under the following circumstances:

## COMPASSIONATE KIDNEY CARE INC.

7351 W. Oakland Park Blvd Suite 105 | Lauderhill, FL 33319-7107 | Phone: 954-908-5992

- When the request is for payment or healthcare operations purposes, disclosure may occur without your separate authorization, as permitted under HIPAA.
- When the request is from a third-party contractor authorized in writing by your insurance company or health plan to act on their behalf, we will verify the contractor's authorization before releasing records.
- When the request falls outside of standard payment or operations purposes — such as for legal proceedings or purposes beyond your current coverage — we will require your written authorization before releasing records.
- When required by law, such as a valid court order, subpoena, or government audit, we will disclose records as required and will notify you when permitted by law to do so.

You have the right to request a list of disclosures we have made of your PHI to insurance companies and their contractors at any time.

### Phone Communication Policy

Compassionate Kidney Care uses a HIPAA-compliant cloud communications platform for all office phone communications. Our phone system vendor has signed a Business Associate Agreement (BAA) with our practice ensuring that all voice, voicemail, and related communications containing PHI are handled in accordance with HIPAA requirements.

Please be aware of the following regarding phone communications with our office:

- Our office receives a high volume of incoming calls, including a significant number of spam and automated calls. As a result, we are unable to return calls to numbers that did not leave a voicemail message.
- To ensure a timely callback, please leave a detailed voicemail including your full name, date of birth, callback number, and the reason for your call.
- Callbacks are made during regular business hours. If your concern is urgent or cannot wait for a callback, please go to your nearest emergency room or call 911.
- For non-urgent matters such as appointment scheduling, prescription refill requests, and general questions, we encourage you to use the Elation patient portal, which is monitored during business hours.

By signing this Notice, you acknowledge that you have been informed of this phone communication policy and understand that calls without voicemails will not receive a callback.

### Access to External Medical Records and Hospital Records

As part of providing you with comprehensive nephrology care, Compassionate Kidney Care may need to access medical records, hospital records, discharge summaries, laboratory results, and imaging studies from other facilities, hospitals, and healthcare providers involved in your care. By signing the Acknowledgement of Receipt of this Notice, you acknowledge and understand that Compassionate Kidney Care Inc. may access, use, and disclose your protected health information for treatment, payment, and healthcare operations as permitted under applicable law. This may include:

- Access your records through hospital electronic health record portals, Health Information Exchanges (HIEs), and provider networks for the purposes of care coordination and treatment
- Review records from any facility where you have received care, including but not limited to hospitals, emergency rooms, specialty clinics, laboratories, and imaging centers
- Access records related to hospitalizations, procedures, emergency visits, and prior nephrology or specialty care to ensure continuity and quality of your treatment
- Communicate with other members of your care team — including your primary care physician, specialists, hospitalists, and other treating providers — to coordinate, transition, and ensure continuity of your care across settings
- Access and review records from hospital admissions and inpatient stays in order to properly transition your care back to the outpatient setting, reconcile medications, and follow up on any clinical developments that occurred during your hospitalization

Where required by law, separate written authorization will be obtained for uses and disclosures of your information that are not otherwise permitted under HIPAA. Limiting or restricting our ability to access outside records may affect our ability to provide comprehensive, coordinated care.

### Electronic Communications — Email Policy

The primary means of secure electronic communication between Compassionate Kidney Care and our patients is through the Elation Health patient portal. The patient portal provides end-to-end encrypted, HIPAA-compliant

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messaging and is the preferred method for all non-urgent communications including appointment scheduling, prescription refill requests, and general questions.

Email communication outside of the patient portal is available only at the explicit written request of the patient. Our practice email system utilizes strong encryption and security safeguards, including end-to-end encryption when supported by the recipient's email service. All communications are encrypted in transit and secured according to industry standards; however, email may still carry inherent risks depending on the recipient's email environment and device security. Please note the following:

- Email is not monitored continuously and is not appropriate for urgent or time-sensitive communications.
- If you request email communication, you acknowledge that email, even when encrypted, carries inherent risks including the possibility of misdirected messages or access by unauthorized individuals on shared devices.
- For urgent medical concerns, please call our office at 954-908-5992 or go to your nearest emergency room.
- You may opt out of email communications at any time by notifying our office in writing.

### Business Associates

We may disclose PHI to our business associates who perform functions on our behalf, including billing companies, transcription services, and technology vendors. All business associates are required to sign Business Associate Agreements (BAAs) and are obligated to protect the privacy and security of your PHI under HIPAA.

### Research

We may use and disclose your PHI for research purposes only if specifically approved by an authorized institutional review board or privacy board that has established protocols to ensure the privacy of your PHI.

### To Others Involved in Your Healthcare

Unless you object, we may disclose relevant PHI to a family member, relative, or close friend that you identify, if that information directly relates to their involvement in your healthcare. In emergency circumstances, we may use professional judgment to determine what disclosure is in your best interest.

### Legal and Public Health Requirements

We may use or disclose PHI as required by law, for public health activities, health oversight, legal proceedings, law enforcement, coroners, organ donation, national security, workers' compensation, or if requested by the Department of Health and Human Services to investigate our compliance with the Privacy Rule.

### Internal Records Release Review Protocol

When patient records are requested and released by this practice, Compassionate Kidney Care maintains internal policies and procedures requiring staff to review records prior to any disclosure. This is to honor patient exclusion preferences — including those related to substance use disorder records, mental health, STD, and HIV/AIDS information — and to ensure that only the minimum necessary information is released. Specific protocols include:

- All records release requests are processed using a documented checklist that must be completed before any records are sent.
- Patient charts are checked for SUD restriction flags or other exclusion preferences before any records are pulled or reviewed.
- All pages being released are reviewed by staff prior to transmission to identify and remove any information the patient has requested to exclude.
- Supervisor sign-off is required for any records release where a patient exclusion flag is present.
- All disclosures are logged in the patient's chart including the date, recipient, records released, and method of transmission.

While our electronic health record system does not provide automated redaction capabilities, this manual review protocol ensures that patient preferences are honored on every records release. Patients who have documented exclusion preferences on file are flagged in our system to alert staff prior to any disclosure.

 I understand how Compassionate Kidney Care may use and share my health information. Initials: \_\_\_\_\_

## SECTION 3: SUBSTANCE USE DISORDER (SUD) RECORDS — SPECIAL PROTECTIONS

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Effective February 16, 2026, federal law requires all HIPAA-covered healthcare providers to inform patients about the special protections that apply to Substance Use Disorder (SUD) records under 42 CFR Part 2.

### What Are SUD Records?

SUD records include any information related to the diagnosis, treatment, or referral for treatment of alcohol use disorder, drug use disorder, opioid use disorder, or any other substance use-related condition. In a nephrology practice, this may include documentation of:

- Alcohol use history or alcoholic nephropathy
- IV drug use history relevant to kidney disease, vascular access, or infection risk
- Medication-assisted treatment (e.g., Suboxone, methadone)
- Substance use disclosed on intake forms or during clinical visits

### How We Handle SUD Records

When our practice maintains records that contain SUD-related information, those records receive the following additional protections under 42 CFR Part 2, in addition to standard HIPAA protections:

- SUD records generally cannot be disclosed to other parties without your specific written authorization, separate from a general medical records release.
- Your authorization for release of SUD records must specifically identify what SUD information may be shared, with whom, and for what purpose.
- You have the right to request that SUD-related information be excluded from any records release — this option is available on our Authorization to Release Medical Records form.
- SUD records cannot be used against you in criminal, civil, or administrative proceedings without your consent or a court order.

### Your Rights Regarding SUD Records

You have the right to: (1) request that SUD information be excluded from any voluntary disclosure; (2) receive a copy of any SUD-related records we maintain; (3) request an amendment if SUD records are inaccurate; and (4) receive an accounting of disclosures of your SUD records.

### SUD Records — Voluntary Releases vs. Court Orders

It is important to understand the distinction between voluntary records releases and legally compelled disclosures:

- Voluntary releases (to another physician, attorney, insurance company, or personal request): Your exclusion preferences documented on your intake form will be honored. Staff will review records before releasing to ensure requested SUD exclusions are applied.
- Court orders and subpoenas: A general subpoena for 'all medical records' is NOT sufficient to override the protections of 42 CFR Part 2. A court order must specifically and explicitly authorize disclosure of substance use disorder records. We will challenge overly broad subpoenas that do not meet this standard and will limit disclosure to exactly what the order requires.
- Government audits (Medicare, Medicaid, HHS): Federal agencies conducting authorized audits may access records including SUD information in certain circumstances as permitted by law. We will limit disclosure to the minimum necessary information required.
- Law enforcement: Disclosure of SUD records to law enforcement requires either your written consent or a specific court order. We will not voluntarily disclose SUD records to law enforcement without one of these.

For questions about SUD record protections, please contact our HIPAA Compliance Officer.

*Note: Receiving treatment at this practice will never result in the unauthorized disclosure of any substance use disorder information. Disclosing SUD history to your physician for treatment purposes is safe and protected.*

 **I understand that substance use disorder records have special protections under federal law.**

Initials: \_\_\_\_\_

## SECTION 4: USE OF ARTIFICIAL INTELLIGENCE (AI) TOOLS

Compassionate Kidney Care Inc. may utilize artificial intelligence (AI) tools as part of our clinical and administrative operations to enhance the quality, efficiency, and accuracy of your care. Any AI tools used in our practice that involve PHI are required to comply with HIPAA, and all applicable vendors will have signed Business Associate Agreements (BAAs) with our practice.

### AI-Assisted Clinical Documentation

## COMPASSIONATE KIDNEY CARE INC.

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We may use AI-assisted scribe or ambient documentation tools during your visit to help generate accurate clinical notes, summaries, and visit documentation. These tools assist in creating your medical record based on your clinical encounter. You will be informed when such tools are in use, and you have the right to opt out.

### Clinical Decision Support

We may use AI-powered clinical decision support tools to assist with quality metrics tracking, medication safety checks, guideline-based care reminders (such as ensuring eligible patients are on appropriate medications for their kidney disease), and population health management. These tools process information already present in your medical record to help ensure you receive evidence-based nephrology care.

### Automated Administrative Workflows

We may use AI-powered automation tools to process patient intake forms, route information to the correct sections of your medical record, send appointment reminders, and manage administrative workflows. These tools operate on HIPAA-compliant infrastructure.

### Minimum Necessary Standard

All AI tools used by this practice are designed to operate under the HIPAA Minimum Necessary Standard — meaning they are configured to access only the information reasonably required for their intended function, as appropriate for the specific tool and clinical context.


For example:

- An AI documentation tool during your visit is designed to process information relevant to that encounter — not your entire medical history.
- A quality metrics tool reviewing medication appropriateness accesses only the diagnosis, labs and medication fields needed for that review.
- An intake form processing tool reads only the fields submitted through that form.

AI tools do not have unrestricted access to your complete medical record unless such access is clinically necessary for your care or required for system functionality. All AI vendors undergo periodic compliance review and are required to maintain current Business Associate Agreements (BAAs).

### AI Limitations Disclosure

AI tools are used to assist — not replace — the clinical judgment of your physician. All AI-generated documentation and recommendations are reviewed and approved by your provider before being applied to your care. Compassionate Kidney Care Inc. maintains full clinical and legal responsibility for the care you receive.

 I understand that Compassionate Kidney Care may use AI tools in my care and documentation, and that all such tools comply with HIPAA. Initials: \_\_\_\_\_

## SECTION 5: EDUCATIONAL VIDEOS, DIGITAL CONTENT, AND DIGITAL PLATFORMS

### Practice-Produced Educational Materials

Compassionate Kidney Care Inc. may produce or share educational videos, written materials, and digital content related to nephrology, kidney health, chronic kidney disease management, and general wellness. These materials may be shared with you during or after your visit as part of your care. Your PHI will not appear in any educational content without your separate, explicit written consent.

### Third-Party Educational Content — Independent Educational Platform

Our practice may share educational content produced by or in partnership with an independent educational platform operated by Dr. Jones John, D.O. This platform offers content covering nephrology education, chronic disease management, wellness, lifestyle, and related topics. Content shared through this platform is educational in nature and does not constitute individualized medical advice.

This educational platform is a separate entity from Compassionate Kidney Care Inc. Your medical records and clinical PHI are not shared with this platform or any platform operated by Dr. Jones John, D.O. outside of this practice.

### Optional Membership and Educational Communications

## COMPASSIONATE KIDNEY CARE INC.

7351 W. Oakland Park Blvd Suite 105 | Lauderhill, FL 33319-7107 | Phone: 954-908-5992


You may be invited to subscribe to educational content or platforms operated by or in association with Dr. Jones John, D.O. — including membership content, video libraries, wellness programming, or community features.

Please note:

- Participation in any such educational platform is entirely voluntary and is never a condition of your medical treatment at Compassionate Kidney Care Inc.
- Your patient email address and contact information on file with this practice constitute Protected Health Information (PHI) under HIPAA because they identify you as a patient of this practice. Using this information to send educational platform communications therefore requires your explicit written authorization.
- By checking the educational platform opt-in checkbox on your patient intake form and submitting that signed form, you are providing valid written authorization for Compassionate Kidney Care Inc. to use your contact information on file — including your email address — to send you occasional educational communications from or about platforms operated by Dr. Jones John, D.O. This includes communications sent via the Elation patient portal, email, or other HIPAA-compliant channels.
- This authorization is specific to educational and wellness communications only. Your PHI will not be shared with, sold to, or transmitted to any external platform or third party.
- You may revoke this authorization and opt out of these communications at any time by notifying our office in writing, calling 954-908-5992, or using the unsubscribe link in any communication you receive.
- Revoking this authorization or opting out of educational communications will have no effect on your medical care.

### Video Recording During Visits

If any portion of your telehealth or in-person visit is recorded for educational, training, or quality improvement purposes, you will be notified in advance and your written consent will be obtained separately. You have the right to decline recording at any time without affecting your care.

 I understand that educational content may be shared with me and that participation in any educational platform operated by Dr. Jones John, D.O. is voluntary. I understand I may opt out of educational communications at any time. Initials: \_\_\_\_\_

## SECTION 6: PRIVACY COMPLAINTS

If you believe your privacy rights have been violated, you have the right to complain to us or directly to the Secretary of the U.S. Department of Health and Human Services. There will be no retaliation against you for filing a complaint.

### To File a Complaint with Our Practice

Contact our HIPAA Compliance Officer at: 7351 W. Oakland Park Blvd, Suite 105, Lauderhill, FL 33319 | Phone: 954-908-5992. All complaints must be made in writing and submitted within 180 days of when you knew or should have known of the suspected violation.

### To File a Complaint with the Federal Government

Secretary of the U.S. Department of Health and Human Services, 200 Independence Ave, S.W., Washington, D.C. 20201 | Phone: (877) 696-6775 | Website: [www.hhs.gov/ocr/hipaa/](http://www.hhs.gov/ocr/hipaa/)

## SECTION 7: OUR LEGAL OBLIGATIONS AND SECURITY COMMITMENTS

We are required by law to maintain the privacy of your PHI and to provide you with this Notice of our legal duties and privacy practices. We are required to abide by the terms of the Notice currently in effect. We reserve the right to change this Notice and to make the changed Notice effective for PHI we already have as well as for any PHI we create or receive in the future.

### Our Security Commitments — Updated for 2025-2026

In alignment with the HHS proposed HIPAA Security Rule updates and current best practices in healthcare cybersecurity, Compassionate Kidney Care Inc. is committed to the following safeguards for your electronic PHI (ePHI):

- Encryption by default: All ePHI is encrypted in transit (when moving between systems) and at rest (when stored). This includes data in our EHR, in transit through our automation systems, and in any backup systems.

## COMPASSIONATE KIDNEY CARE INC.

7351 W. Oakland Park Blvd Suite 105 | Lauderhill, FL 33319-7107 | Phone: 954-908-5992

- **Multi-factor authentication (MFA):** All staff members are required to use multi-factor authentication when accessing systems that contain your PHI.
- **Access controls:** PHI access is limited to workforce members who need it for their specific job function. We review and update access permissions regularly.
- **Audit logging:** All access to your electronic health records is logged and periodically reviewed to detect any unauthorized access.
- **Regular risk assessments:** We conduct periodic security risk assessments to identify and address vulnerabilities in our systems.
- **Incident response:** We maintain a written incident response plan and breach notification procedures in compliance with HIPAA's Breach Notification Rule.
- **Workforce training:** All staff members receive regular HIPAA training, including training on the proper use of AI tools and digital systems that process PHI.
- **Vendor oversight:** All third-party vendors who access or process your PHI are required to sign BAAs and are periodically reviewed for ongoing compliance.

If you have any questions regarding this Notice or our security practices, please ask to speak with our HIPAA Compliance Officer in person or by phone.

Original Effective Date: 03/2018 | Revised: 04/2020 | **Current Revision: 04/2026**

*This notice supersedes all prior versions.*