

## **AAA Ambulance Service** **NOTICE OF PRIVACY PRACTICES**

### **IMPORTANT: 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.**

AAA Ambulance Service is dedicated to protecting your medical information. We are required by law to maintain the privacy of protected health information (PHI) and to provide you with this Notice of our legal duties and privacy practices with respect to protected health information (PHI). AAA Ambulance Service is required by law to abide by the terms of this Notice. AAA reserves the right to change the terms of this Notice, and any such changes would be effective immediately. If AAA Ambulance Service revises the terms of this Notice, it will make copies of this Notice of Privacy Practices available upon request and on our website. You may also request a paper copy of this Notice from us at any time.

**Patient's Individual Rights:** In addition to your right to receive communications of your PHI from us in a confidential manner, you have the following rights:

- The right to inspect and copy your medical information. This right is subject to certain specific exceptions, and you may be charged a reasonable fee for any copies of your records.
- The right to request that we contact you regarding PHI in a specific way (for example, home or office phone) or to send mail to a certain address. We will accommodate all reasonable requests.
- The right to request restrictions on certain uses and disclosures of your PHI, but in some instances we are not required to agree to your requested restriction, except that we must comply with your request that we not disclose to your health insurer information regarding treatment for which you pay in full.
- The right to request an amendment of your medical information. In certain instances, we may deny your request, but, if denied, we will provide you with a written explanation for the denial.
- The right to receive an accounting of the disclosures of your medical information for six years prior to your request. You may obtain one accounting a year at no charge, but we will charge a reasonable fee if you request another one within 12 months.
- The right to complain to AAA Ambulance Service and/or to the United States Department of Health and Human Services Office for Civil Rights if you believe that we have violated your privacy rights. To complain to us, please call our Privacy Officer, at (601) 296-4681. If you choose to file a complaint, you will not be retaliated against in any way.

**Uses and Disclosures of PHI:** AAA Ambulance Service may use and disclose your PHI without your written authorization:

- For treatment purposes – We can use your health information and share it with other professionals who are treating you. Examples include: using your PHI to facilitate your proper care or disclosing your PHI in writing or via radio or telephone to a hospital or dispatch center when proper for your treatment.
- For payment purposes – We can use and share your health information to bill and get payment from health plans and other entities. Examples include: billing and seeking reimbursement, managing accounts, determining and reviewing medical necessity, and collecting outstanding accounts.
- For purposes of health care operations – We can use and share your health information to run our business, improve your care, and contact you when necessary. Examples include: quality assurance activities, licensing, training programs, obtaining legal and financial services, conducting business planning, processing grievances and complaints, and creating reports for data collection purposes.
- For the treatment activities, payment activities, or health care operations of another health care provider (such as a hospital).
- If we receive your substance use disorder (SUD) treatment records from a program covered by 42 C.F.R. Part 2, how we can use them depends on the type of consent you gave:
  - General consent: If you gave general consent to the Part 2 Program for treatment, payment, or health care operations, we may use and disclose those records for those same purposes, subject to applicable rights and protections.
  - Specific written consent: If you provided specific written consent to us (or another third party), we may only use or disclose the records as explicitly allowed in that consent.
- SUD records that are disclosed may be redisclosed in some cases. However, we will not use or disclose these records – or testify about them – in any federal, state, or local civil, criminal, administrative, or legislative proceeding against you unless you provide written consent or a court issues an order after notifying you.
- To remind you of any scheduled appointments for non-emergency transportation or to inform you about other services.
- For other purposes permitted by law and for activities related to AAA Ambulance Service's compliance with the law.
- Unless you object, to inform family members or other concerned individuals involved in your care about your general condition, where you are being taken, and other general information.
- To report certain situations as required by law to public health authorities and law enforcement agencies (such as reporting a birth, death, or communicable disease, child or adult abuse or neglect, domestic violence, a knifing or shooting, a threat of violence being made, etc.).
- For health oversight activities such as audits or government investigations, inspections, disciplinary proceedings, etc.
- In judicial and administrative proceedings as required by a court or administrative order, or in response to a subpoena or other legal process compliant with HIPAA.
- To law enforcement in limited situations, such as when properly subpoenaed or when the information is needed to locate a suspect or stop a crime.
- For military, national defense and security and other special government functions.
- To avert a serious threat to the health and safety of a person or the public at large.
- For workers' compensation purposes.
- To coroners, medical examiners, and funeral directors as authorized by law.
- If you are an organ donor, to release health information to organizations that handle organ procurement or organ, eye or tissue transplantation or to an organ donation bank, as necessary to facilitate organ donation and transplantation.
- For research projects, subject to strict oversight and only when there is a minimal risk to your privacy and adequate safeguards are in place in accordance with the law.
- We may further use or disclose health information about you in a way that does not personally identify you or reveal who you are.

Any other uses or disclosures of PHI other than those listed above, including the sale or marketing of your information, will be made only with your written authorization. You may revoke your authorization at any time, in writing, except to the extent that we have already used or disclosed medical information in reliance on that authorization.

If a breach occurs that may have compromised the privacy or security of your protected health information, we are required by law to notify you promptly.

If you would like further information regarding your rights or regarding the uses and disclosures of your medical information, you may contact the Privacy Officer for AAA Ambulance Service by mail, P.O. Box 17889, Hattiesburg, MS 39404-7888, or by calling telephone (601) 296-4681.

Effective Date: 2/13/2026