

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 takes effect on October 5, 2026. It replaces our notice effective August 1, 2020.

This notice explains how we may use and share your health information, your rights, and our legal duties. In this notice, "we" and "our" mean Paul N Morton, LLC, doing business as Pacific Bone & Joint. It covers all health information about you that we create or receive, on paper or electronically, that relates to your health, your care or payment for your care. This includes information from clinic visits, phone calls, messages and video (telehealth) calls, and records or images sent to us before a visit.

Your rights

When it comes to your health information, you have certain rights. To use them, contact our Privacy Officer, Dr. Paul N. Morton (details under "Questions and contact" at the end of this notice). Some requests must be in writing, as noted below.

- **Get a copy of your medical record:** You can ask in writing to see or get a paper or electronic copy of your medical record and other health information we have about you. We will provide an electronic copy in the form you ask for if we can readily produce it, or in another readable form we agree on. We may charge a reasonable, cost-based fee for copies we give you. You can also ask in writing, signed by you, that we send an electronic copy of your electronic health record to a person you name. We will respond within 30 days; if we need more time, we will tell you in writing why and when to expect it, which will be no more than 30 more days. If we deny any part of your request, we will tell you why in writing and whether you can have the denial reviewed.
- **Ask us to correct your medical record:** You can ask us in writing, with your reason, to correct health information about you that you think is incorrect or incomplete. We will respond within 60 days, or tell you in writing why we need up to 30 more days. We may say "no," but we will tell you why in writing, and you may give us a statement of disagreement to keep with your record.
- **Ask us to contact you in a different way:** You can ask in writing that we contact you in a specific way (for example, by mail or email) or at a different address (for example, at work). We will not ask why, and we will agree to reasonable requests.

- **Ask us to limit what we use or share:** You can ask us not to use or share certain health information for treatment, payment or our operations, or with people involved in your care. We are not required to agree, and we may say “no” if it would affect your care. If we agree, we will follow your request except when the information is needed to treat you in an emergency, or when the law requires or allows us to share it without your permission (see “Other uses and disclosures allowed or required by law”). If you pay in full out of pocket for a service or item (or someone other than your health plan pays for you), you can ask us not to share information about it with your health plan for payment or our operations. We will say “yes” unless a law requires us to share it. We may end an agreement by telling you. Ending it applies only to information we create or receive after we tell you, and we cannot end an agreement to keep information about care paid for out of pocket from your health plan.
- **Get a list of those with whom we’ve shared information:** You can ask for a list (an “accounting”) of the times we have shared your health information in the six years before your request, who we shared it with, and why. It will include all the times we shared it except those for treatment, payment and our operations, and certain other sharing (such as any you asked us to make). We will respond within 60 days, or tell you in writing why we need up to 30 more days. The first list in any 12 months is free; for another within 12 months we may charge a reasonable, cost-based fee, and we will tell you the fee first.
- **Get a paper copy of this notice:** You can ask for a paper copy of this notice at any time, even if you have agreed to receive it electronically. It is also posted on our website at jointreplacementhawaii.com/notice-of-privacy-practices/.
- **Choose someone to act for you:** If someone is your legal guardian or has your medical power of attorney, that person can use your rights and make choices about your health information. We will check that the person has this authority before we act.
- **File a complaint if you feel your rights are violated:** See “How to file a complaint” below. We will not retaliate against you for filing a complaint.

Your choices

For certain health information, you can tell us your choices about what we share. If you have a clear preference in the situations below, tell us, and we will follow your instructions.

- **Family, friends and others involved in your care:** We may share information with a family member, close friend or other person you name who is involved in your care or in paying for it, limited to what is relevant to their role. For example, we may tell a family member who will help you at home how your recovery is going. You can tell us not to. If you are not present or cannot tell us your preference, for example if you are unconscious, we may share information if we believe it is in your best interest.
- **Disaster relief:** We may share information with a disaster relief organization so that your family can be told where you are and how you are doing. You can tell us not to, unless sharing is needed to respond to the emergency.

- **Marketing and sale of your information:** We will never use or share your information for marketing, and we will never sell your information, unless you give us written permission. Appointment reminders are not marketing, and neither are messages about your treatment or our own services, as long as no outside company pays us to send them.
- **Facility directory:** If you are at one of our clinics, we may list your name, where you are in the clinic and your general condition in a directory, and share this information with clergy or with people who ask for you by name. If we list your religious affiliation, we will share it only with clergy. You can tell us not to list you.

Our uses and disclosures

We typically use or share your health information in the following ways. The law does not require us to get your consent for these.

- **Treat you:** We use your health information and share it with other professionals who are treating you. For example, we may share information with a specialist we refer you to, or with the hospital or surgery center where you have your operation.
- **Run our practice:** We can use and share your health information to run our practice, improve your care and contact you when necessary. For example, we may review records to check the quality of our care, or share information with a health plan or other organization that reviews the quality of care or the competence of providers. We may also share information with another provider or health plan that has a relationship with you, for its own quality review, case management or fraud prevention.
- **Bill for your services:** We can use and share your health information to bill and get payment from health plans or others. For example, we give information to your health plan to confirm your coverage, to get paid, and when it reviews whether a service is medically necessary. We may also share information with billing services or collection agencies that work for us.
- **Appointment reminders and health-related information:** We may contact you to remind you of appointments, or to tell you about treatment options or other health-related benefits and services that may interest you.

Other uses and disclosures allowed or required by law

We are allowed or required to share your information in other ways, usually ones that contribute to the public good, such as public health and research. The law sets conditions we must meet first, and some information has extra protection (see "Extra protection for some information").

- **Comply with the law:** We will share information about you when state or federal law requires it, including with the U.S. Department of Health and Human Services if it wants to see that we are complying with federal privacy law.
- **Help with public health and safety:** We can share health information for public health activities, such as preventing or controlling disease; reporting problems with medications or medical devices, such as joint implants, to the FDA or the manufacturer, or helping with recalls;

reporting suspected abuse, neglect or domestic violence, including of a child, to the authorities allowed to receive such reports; and preventing or lessening a serious threat to anyone's health or safety.

- **Do research:** We can use or share your information for health research, only under the conditions the law sets to protect your privacy.
- **Respond to organ and tissue donation requests:** We can share health information about you with organizations that handle organ, eye or tissue donation.
- **Work with a medical examiner or funeral director:** We can share health information with a coroner, medical examiner or funeral director when an individual dies.
- **Address workers' compensation, law enforcement and other government requests:** We can use or share health information about you for workers' compensation claims. We can share it for law enforcement purposes, such as reporting certain injuries when the law requires it or helping to identify or locate a person. We can share it with health oversight agencies for activities the law allows, such as audits and inspections. We can also share it for special government functions, such as military and veterans' activities, national security and protective services for the President and others, and with a correctional institution or law enforcement official who has custody of you.
- **Respond to lawsuits and legal actions:** We can share health information about you in response to a court or administrative order, or in response to a subpoena or other lawful request when the conditions set by federal and Hawai'i law are met, such as that you were told about the request or that a protective order was sought. Some information has extra protection in legal proceedings (see "Extra protection for some information").

Extra protection for some information

Some Hawai'i and federal laws set special rules for certain health information, and some give it more protection than HIPAA (the federal health privacy law that requires this notice) does. Examples include information about HIV/AIDS, records of substance use disorder treatment from federally assisted programs (see below), care that a minor may legally consent to on their own, and lawful reproductive health care and gender-affirming health care. For example, Hawai'i law limits when information about HIV/AIDS, or about lawful reproductive or gender-affirming health care, may be shared in a lawsuit or other legal proceeding; in some cases it may be shared only with your written permission, which you may refuse. Hawai'i law also does not allow us to use or share information about lawful reproductive or gender-affirming health care to investigate, or to hold liable, anyone just for seeking, getting, providing or helping someone get that care. When a stricter law applies to your information, we follow it.

Substance use disorder treatment records: If we receive records from a federally assisted substance use disorder program (covered by the federal rules at 42 CFR Part 2), we will not use or share those records, or testimony about what they contain, in any civil, criminal, administrative or legislative proceeding against you unless you consent in writing, or a court orders it after you or

the holder of the records has had notice and a chance to be heard. Such a court order must come with a subpoena or other legal requirement compelling the disclosure before the records are used or shared.

Our responsibilities

- We are required by law to maintain the privacy and security of your protected health information, and to give you this notice of our legal duties and privacy practices.
- We will let you know promptly, as the law requires, if a breach occurs that may have compromised the privacy or security of your unsecured health information.
- We must follow the duties and privacy practices described in this notice and the terms of the notice currently in effect.
- We will not use or share your information other than as described here unless you give us written permission. We will not make your treatment depend on whether you give us this permission, except in the limited cases the law allows. You may change your mind at any time by telling us in writing, except where we have already acted on your permission.

Changes to the terms of this notice

We can change the terms of this notice, and the changes will apply to all information we have about you, including information we created or received before the change. If we change this notice, we will post the new notice at each of our clinics and on our website, and you can ask us for a copy. Unless the law requires otherwise, a significant change will not take effect before the effective date of the new notice.

How to file a complaint

If you believe your privacy rights have been violated, you can complain to us or to the U.S. Department of Health and Human Services. We will not retaliate against you for filing a complaint.

- **To us:** Call, email or write to our Privacy Officer, using the details under “Questions and contact” below.
- **To the Office for Civil Rights:** You can file a written complaint with the U.S. Department of Health and Human Services Office for Civil Rights online at the OCR Complaint Portal, ocrportal.hhs.gov; by email to OCRComplaint@hhs.gov; or by mail to Centralized Case Management Operations, U.S. Department of Health and Human Services, 200 Independence Avenue, S.W., Room 509F HHH Bldg., Washington, D.C. 20201. For help, call OCR at 1-800-368-1019 (TDD 1-800-537-7697). Complaints to OCR are generally due within 180 days of when you knew or should have known about the problem; OCR may extend this for good cause.

Questions and contact

For more information about this notice or our privacy practices, to use any of the rights described here, or to make a complaint, contact our Privacy Officer, Dr. Paul N. Morton:

- **By phone:** (808) 439-6201
- **By email:** Contact@pacificboneandjoint.com
- **In person or in writing:** at the front desk of any of our clinics.