HIPAA Privacy Policy #5
General Uses and Disclosures of Protected Health Information

Effective Date: January 22, 2020

<table>
<thead>
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<th>Refer to Privacy Rule Sections:</th>
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<td>164.502(A)</td>
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Authorized by:
Equinox Board of Directors

Version #:

Policy: This Policy describes Equinox, Inc. responsibilities for the use and disclosure of Protected Health Information. Equinox, Inc. may not use or disclose Protected Health Information of patients, unless explicitly authorized by the patient or his or her personal representative, or permitted or required by HIPAA, Federal or New York State Law.

Procedures:

1. Permissible Uses and Disclosures of Protected Health Information: The following are circumstances under which Equinox, Inc. is permitted to use or disclose Protected Health Information when permitted by New York State Law:

   a. to the patient;
   b. for treatment, with consent (See Policy No. 11 entitled “Uses and Disclosures of Protected Health Information with Patient Consent for Treatment”);
   c. for payment, with consent (See Policy No. 12 entitled “Uses and Disclosures of Protected Health Information with Patient Consent for Payment”);
   d. for health care operations, with consent (See Policy No. 13 entitled “Uses and Disclosures of Protected Health Information with Patient Consent for Health Care Operations”);
   e. pursuant to an authorization signed by the patient which meets the requirements of 45 CFR § 164.508, which specifically references mental health, substance abuse and/or HIV information, if relevant (See Policy No. 14 entitled “Uses and Disclosures of Highly Sensitive Information”);
   f. incidental to a use or disclosure permitted or required by HIPAA;
   g. in accordance with disclosures for public health activities, health oversight, judicial and administrative proceedings, for victims of abuse, neglect or domestic violence, law enforcement purposes, research and as further permitted under 45 CFR §§ 164.512, 164.514(e), (f) or (g). (See Policies: Uses and Disclosure of Protected Health Information Without Patient Authorization for Public Health Activities; Uses and Disclosures of Protected Health Information Without Patient Authorization for Health Oversight Activities; Uses and Disclosures of Protected Health Information Without Patient Authorization for Judicial and Administrative Proceedings (Subpoenas and Orders); Uses and Disclosures of Protected Health Information Without Patient Authorization for Suspected Abuse, Neglect or Domestic Violence; Uses and Disclosures of Protected Health Information Without Patient Authorization for Law Enforcement Purposes; Uses
and Disclosures of Protected Health Information Without Patient Authorization for Research); and

h. to persons involved in the patient’s care, or for notifications about the patient when the patient has agreed to the disclosure, or has been provided an opportunity to agree or object, and the patient does not express an objection. See Policy No. 16 entitled “Uses and Disclosures of Protected Health Information Without Patient Authorization to Family and Friends.”

2. Required Disclosures of Protected Health Information: The following are the circumstances under which Equinox, Inc. is required to disclose Protected Health Information:

a. to a patient when requested to have access or for an accounting, subject to HIPAA; and

b. when required by the Secretary of Health and Human Services to determine whether Equinox, Inc. has complied with HIPAA.

REFERENCES