BOSTON UROGYN, LLC · HIPAA NOTICE

Notice of Privacy Practices

Effective December 1, 2026 · Issued by Boston Urogyn, LLC, 70 Walnut Street, Suite 101, Wellesley, MA 02481

Your Information. Your Rights. Our Responsibilities.

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

Get an electronic or paper copy of your medical record. You can ask to see or get a copy of your medical record and other health information we have about you, or view much of it in the Boston Urogyn patient portal. We will provide a copy or summary, usually within 30 days. We may charge a reasonable, cost-based fee.

Ask us to correct your medical record. You can ask us to correct information you think is incorrect or incomplete. We may say “no,” but we’ll tell you why in writing within 60 days.

Request confidential communications. You can ask us to contact you in a specific way (for example, by cell phone) or at a different address. We will say “yes” to all reasonable requests.

Ask us to limit what we use or share. You can ask us not to use or share certain information for treatment, payment or our operations. We are not required to agree, and may say “no” if it would affect your care. If you pay for a service in full out of pocket, you can ask us not to share that information with your health insurer, and we will say “yes” unless a law requires us to share it.

Get a list of those with whom we’ve shared information. You can ask for a list (accounting) of the times we’ve shared your health information in the six years before you ask, who we shared it with, and why. It excludes treatment, payment, operations and certain other disclosures. One list a year is free; we may charge a reasonable, cost-based fee for another within 12 months.

Get a copy of this notice on paper at any time, even if you agreed to receive it electronically.

Choose someone to act for you. A person with your medical power of attorney, or your legal guardian, can exercise your rights. We will confirm their authority first.

File a complaint with our Privacy Officer (below), or with the U.S. Department of Health and Human Services Office for Civil Rights: 200 Independence Avenue, S.W., Washington, D.C. 20201, 1-877-696-6775, or hhs.gov/hipaa/filing-a-complaint. We will not retaliate against you for filing a complaint.

Your choices

Tell us if you want us to share, or not share, information with family, close friends or others involved in your care or payment, or in a disaster relief situation. If you can't tell us, for example if you are unconscious, we may share information if we believe it is in your best interest, or to lessen a serious and imminent threat to health or safety.

We never share your information for **marketing**, **sell** it, or share most **psychotherapy notes** unless you give us written permission. We may contact you about fundraising, and you can tell us not to contact you again.

Our uses and disclosures

- **Treat you.** *Example: with your permission, we send our findings to your OB or pelvic floor physical therapist.*
- **Run our practice.** *Example: we use your information to manage your care and send appointment reminders.*
- **Bill for your services.** *Example: we give your health plan the information it needs to pay for your visit.*

We may also share information, when the law's conditions are met, to help with public health and safety (preventing disease, product recalls, reporting adverse reactions or suspected abuse, neglect or domestic violence, preventing a serious threat to health or safety); for research; to comply with the law, including with HHS; for organ and tissue donation; with a medical examiner or funeral director; for workers' compensation, law enforcement, health oversight and special government functions; and in response to a court or administrative order or a subpoena.

Substance use disorder records. To the extent we have records subject to 42 CFR part 2, we will not use or share them in civil, criminal, administrative or legislative

proceedings against you without your written consent or a court order and a subpoena, and we will give you notice and a choice before using them for fundraising.

Extra protections under Massachusetts law

Where Massachusetts law is stricter, we follow it. We will not share HIV test results or genetic test results without your written consent, or communications with a psychotherapist or psychologist without your consent except for your treatment or as another law requires. We will not share information about legally protected reproductive or gender-affirming care in response to out-of-state legal requests unless the law requires it. You also have a right under Massachusetts law to see and copy your record.

Our responsibilities

- We are required by law to keep your protected health information private and secure.
- We will tell you promptly if a breach may have compromised it.
- We must follow this notice and give you a copy.
- We will not use or share your information in other ways unless you tell us we can in writing, and you can change your mind in writing at any time.
- **We never sell your health information.**

We can change this notice, and the changes will apply to all information we have about you. The new notice will be available on request, in our office and on our website.

Contact

Privacy Officer: Neeraj Kohli, MD · Boston Urogyn, LLC, 70 Walnut Street, Suite 101, Wellesley, MA 02481 · 617-340-6446 · privacy@beyondbabymd.com