KECK MEDICINE OF USC
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.

What is this Notice and Why Is It Important?

We are required by law to maintain the privacy of your identifiable medical and other health information ("health information"), to provide you with notice of our legal duties and privacy practices with respect to your health information, and to notify you in the event of a breach of your unsecured health information. This Notice describes your rights and our obligations for using and disclosing your health information and informs you about laws that provide special practices for your health information. Keck Medicine of USC must follow the terms of this Notice when using or disclosing your health information.

In some circumstances, we may be required to provide more restrictive treatment to certain categories of health information that may limit or preclude some accesses, uses or disclosures described in this Notice, such as records containing psychotherapy notes, abortion and abortion-related services, genetic testing information, information on persons with developmental disabilities, information concerning HIV/AIDS testing, treatment for mental health conditions or substance use disorders, or information regarding emancipated minors. Please see the attached Substance Use Disorder (SUD) Privacy Addendum for details on how SUD information is protected under federal law (42 CFR Part 2).

Who Does this Notice Apply to?

This Notice describes the privacy practices of the following parties of Keck Medicine of USC including: Keck Hospital of USC, USC Norris Cancer Hospital, USC Verdugo Hills Hospital, USC Arcadia Hospital, USC Care Medical Group, and USC Medical Staff Members and Allied Health Professionals, employees, volunteers, students, and other workforce members of the organizations listed above when they provide services to you at any site of the above entities.

Within this Notice, a reference to "Keck Medicine of USC" and "we," us" and "our" is defined to include all the entities and their workforce members listed above.

This Notice is effective as of May 1, 2026.

How We May Use or Disclose Your Health Information ***(For SUD records, additional restrictions apply. See the SUD Privacy Addendum for further details.)***

For Treatment: We may use your health information to provide you with medical treatment or services. Doctors, nurses, technicians, healthcare students, or other medical personnel who are involved in your care may access your health information. For example, a doctor treating you may need to inform the dietitian if you have diabetes to arrange meals that are suitable for you. Different departments of Keck Medicine of USC may also share medical

information about you to coordinate other necessary services, such as prescriptions, lab work, and X-rays. We may also disclose health information about you to individuals outside of Keck Medicine of USC who are involved in your medical care for continuity of care, such as your Primary Care Physician, skilled nursing facilities, home health agencies, or referrals to other practitioners.

For Payment: We may use and disclose your health information to bill for the treatment and services you received and to collect payment from you, an insurance company, or a third party. For example, we may need to provide your health plan with information about a procedure you received so that your health plan can pay us or reimburse you for the procedure. We may also tell your health plan about a treatment you are going to receive to obtain prior approval or to determine whether your plan will cover the treatment. We may provide basic information about you and your health plan, insurance company, or other source of payment to practitioners outside of Keck Medicine of USC who are involved in your care to assist them in obtaining payment for services they provided to you. However, we cannot disclose information to your health plan for payment purposes if you request that we not do so, and you pay for the services in full.

For Health Care Operations: We may use and disclose health information about you for health care operations. These uses and disclosures are necessary to operate Keck Medicine of USC and ensure that our patients receive quality care. For example, we may use health information to review our treatment and services and to evaluate the performance of our staff in caring for you. We may also combine health information about many patients to evaluate what additional services to offer. We may also use health information for review and learning purposes. We may also combine the health information we have with health information from other hospitals to compare how we are doing and see where we can make improvements in the care and services we offer. We may use your health information to create de-identified data, which is stripped of your identifiable data and no longer identifies you.

We may use algorithms, artificial intelligence (AI), and other automated tools to support our healthcare operations, enhance the quality of your care, and help keep our services safe. These technologies may assist our workforce members with tasks such as diagnostic analysis, predicting health risks, scheduling, billing, and summarizing medical records. We maintain strict security measures to protect your health information when it is processed by these tools. These technologies support our decision-making, but do not replace the professional judgment of your doctors, nurses, technicians, and other healthcare personnel who are involved in taking care of you. We are committed to using AI responsibly and monitoring these systems to help ensure they, and their outputs, are fair, accurate, and improve the patient experience.

Organized Health Care Arrangement: We participate in organized health care arrangements (OHCA) with other providers. We may share information with its OHCA members for treatment, payment, and joint health care operations.

Inpatient Facility Directory: While you are hospitalized as an inpatient, in an ambulatory surgery or observation setting at Keck Medicine, we may include your name, location in

our hospitals, general health condition, and religious affiliation in a patient directory without obtaining your authorization unless you object to inclusion in the directory. Information in the directory may be disclosed to anyone who asks for you by name or to members of the clergy; provided, however, that your religious affiliation will only be disclosed to members of the clergy. You have the right and choice to request that we exclude your information, such as your name, room number, or general condition, from our hospital patient directories. If you do not want to be included in the directory, please notify the Admitting Representative upon admission or at any time during your admission.

Individuals Involved in Your Care or Payment for Your Care: Under appropriate circumstances, including emergencies, we may disclose your health information to a family member, Personal Representative, other relative, a friend, or any other person identified by you who is involved in your health care or payment for your health care. In addition, we may disclose your health information to caregivers and other persons who are with you or appear on your behalf (for example, to pick up a prescription). We may also need to notify such persons of your location in our facility and general condition. If you object to such disclosures, please notify your Keck Medicine of USC health care provider. If you are not present or the opportunity to agree or object to a use or disclosure cannot practicably be provided because of your incapacity or an emergency circumstance, we may exercise professional judgment to determine whether a disclosure is in your best interests. If information is disclosed to a family member, other relative, or friend, we will disclose only information believed to be directly relevant to the person's involvement with your health care or payment related to your health care.

Public Health Activities: We may disclose your health information for the following public health activities:

- To report to public health authorities for the purpose of preventing or controlling disease, injury or disability;
- To report information to the U.S. Food and Drug Administration (FDA) about products and services under its jurisdiction;
- To alert a person who may have been exposed to a communicable disease or may otherwise be at risk of contracting or spreading a disease; or
- To report information to your employer as required under laws addressing work-related illnesses and injuries or workplace medical surveillance.

Victims of Abuse, Neglect, or Domestic Violence: If we reasonably believe that you are a victim of abuse, neglect, domestic violence, or sexual violence, we may disclose your health information as required by law to a social services agency or other governmental agency authorized by law to receive such reports. We may also disclose health information to report known or suspected child abuse or neglect, if the report is made to a public health authority or other appropriate government authority that is authorized by law to receive such reports.

Health Oversight Activities: We may disclose your health information to a health oversight agency that is responsible for ensuring compliance with the rules of government health programs such as Medicare or Medicaid.

Specialized Government Functions: We may use and disclose your health information to units of the government with special functions, such as the U.S. military, under certain circumstances required by law. We may also disclose your health information to certain authorities if you are in the custody of law enforcement or an inmate in a correctional institution.

Law Enforcement Officials, Judicial, and Administrative Proceedings: We may disclose health information to police or other law enforcement officials in certain limited, specific circumstances or in compliance with a court order or other legal process in compliance with applicable law. We may also disclose health information in judicial or administrative proceedings, such as in response to: (a) a court order; (b) a legally valid order issued by a state or federal administrative agency or licensing board; and (c) a subpoena, discovery request, or other lawful process in compliance with applicable law.

Coroners, Medical Examiners, and Funeral Directors: We may disclose health information to a coroner or a medical examiner as required by law. We may also disclose medical information about patients of Keck Medicine of USC to funeral directors as necessary to carry out their duties.

Organ and Tissue Donation: We may disclose health information to organizations that assist with organ, eye, or tissue donation, banking, or transplant.

Health or Safety: We may disclose health information to prevent a serious threat to your health and safety or the health and safety of the public or another person.

Health Information Exchange: We, along with other health care providers, may participate in one or more health information exchanges (HIEs). An HIE is a community-wide information system used by participating health care providers to share health information about you for treatment purposes. Health care providers from different facilities that are treating you and participating in the HIE can share your health information electronically. The HIE enables your health care providers to have access to information that supports effective treatment, such as laboratory results, prior diagnoses, and current medications. If you do not want to have your Keck Medicine of USC health information shared in the HIE, you may opt out by completing the *Keck Medicine of USC HIE Patient Opt-Out Form*. SUD records protected under 42 CFR Part 2 will not be shared through an HIE unless permitted under 42 CFR Part 2.

For Research: Under certain circumstances, we may use and disclose health information about you for research purposes. For example, we may disclose health information about you to Keck Medicine of USC researchers who are preparing to conduct a research project for the purpose of contacting you to determine if you are interested in participating in the study. Generally, research projects are subject to a special approval process. This process evaluates a proposed research project and its use of health information, trying to balance the research needs with patients' needs for privacy of their health information. Before we use or disclose health information for research, the project will have been approved through this research approval process.

Limited Data Sets: We may share identifiable health information about you (but not including your name, address, social security number, or other direct identifiers) for research, public health, or health care operations, but only if the recipient of such information signs an agreement to protect the information and not use it to identify or contact you.

De-identified Health Information: We may use your health information to create "de-identified" information that is not identifiable to any individual in accordance with the Health Insurance Portability and Accountability Act of 1996, Pub. L. No. 104-191, 110 Stat. 1936., and its implementing regulations ("HIPAA"). We may create data sets of de-identified information of many patients to share with outside persons and companies to discover new ways to diagnose and treat diseases and to improve care for the communities we serve. We may also disclose your health information to a business associate to create de-identified information.

Development and Fundraising Activities: We may contact you to request a contribution to support important Keck Medicine of USC activities. For fundraising, we may disclose to our fundraising staff demographic information about you (for example, your name, address, and phone number), dates on which we provided health care to you, information about the department of service or treating physician, outcome information, or health insurance status without your written permission. We may also share such information about you with closely related foundations that assist us in our development activities. We will not disclose your diagnosis or treatment, however, unless we have your written authorization to do so.

If you do not want to be contacted for Keck Medicine of USC fundraising efforts, you must notify us in writing at KeckMedOut@usc.edu. If you do not want to be contacted for USC Arcadia Hospital fundraising efforts, you must notify us in writing at UAH-Foundation@med.usc.edu.

Marketing Activities: We may conduct the following activities without obtaining your authorization:

- Provide you with marketing materials in a face-to-face encounter;
- Give you a promotional gift of nominal value;
- Provide refill reminders or otherwise communicate about a drug or biologic that is currently prescribed to you, so long as any payments we receive for making the communication are reasonably related to our costs;
- Tell you about USC's own health care products and services

If we accept payments from other organizations or individuals in exchange for telling you about their health care products or services, we will ask for your authorization, except as described above or unless the communications are permitted by law without your permission. We will ask your permission to use your health information for any other marketing activities. Also, from time to time, Keck Medicine of USC receives letters from patients, their family members, and friends describing their experience and the care they received at Keck Medicine of USC. Where possible, we share these letters with our Keck Medicine of USC employees and patients. Before sharing your letter, we will remove your name and any other identifying information to protect your privacy.

Workers' Compensation: We may disclose health information as authorized by and to the extent necessary to comply with laws relating to workers' compensation or other similar programs or as required under laws concerning workplace injury and illness.

Business Associates: We may contract with third parties to perform certain services for us, such as billing, copying, consulting, or other services. These third-party service providers, referred to as Business Associates, may need to access your health information to perform services on our behalf. They are required by contract and law to protect your health information and only use and disclose it as necessary to perform their services for us.

As Required by Law: We may disclose health information when required to do so by any other law not already referred to in the preceding categories.

Note on other Restrictions: As noted above, California law may impose more strict requirements on how we use and disclose certain types of health information than HIPAA does. If there are stricter rules or restrictions, we will only use and disclose your health information in accordance with those stricter requirements. Federal confidentiality rules for Substance Use Disorder (SUD) records are stricter than HIPAA. Please see the attached SUD Privacy Addendum for an explanation of these protections and how Keck Medicine of USC can use and disclose SUD records of yours that it receives or maintains from other providers subject to 42 CFR Part 2.

Uses and Disclosures Requiring Your Written Authorization

For any purposes other than those described in this Notice, we may use or disclose your health information only when you permit us to do so by written authorization. Keck Medicine of USC has developed an *Authorization to Use and Disclose Protected Health Information* form ("Keck Medicine Authorization") for this purpose. If you sign an authorization to disclose information, except to the extent we have already relied on it, you can revoke that authorization at a later time or stop any future use and disclosure of your health information. If you wish to revoke a prior authorization, you must submit your request in writing to the Office of Healthcare Compliance.

Sale of Protected Health Information: We will not make any disclosure that is considered a sale of your protected health information without your written authorization, unless the disclosure is for a purpose permitted by law.

Your Rights Regarding Your Health Information

Right to Request Access to Your Health Information: You have the right to inspect and maintain a copy of the patient records we maintain to make decisions about your treatment and care. All requests for access must be made in writing. Under limited circumstances, we may deny you access to your records. If you would like access to your records, you may obtain a *Patient Request to Access Health Information* form from your local site of service or online at KeckMedicine.org. The completed form may be submitted by mail, fax, or in person to the Keck Medicine of USC Health Information Management Department. If you request copies, we will charge you a reasonable fee for them. We will also charge you for

our postage costs if you request that we mail the copies to you. If you are a parent or legal guardian of a minor, certain portions of the minor's medical record may not be accessible to you under California law.

Keck Medicine of USC also offers access to your health information via the myUSCchart patient portal. MyUSCchart allows you to communicate with your physician or care team, access test results, and request prescription renewals and appointments from your personal computer or smartphone. For additional information, contact (800) USC-CARE (800-872-2273) or visit KeckMedicine.org.

You have the right to request that we provide your requested health information either to you, or to another person designated by you. If you request us to provide your health information to another person designated by you, you must clearly identify in writing the designated person and where we are to send the copy of your health information and sign your request.

Right to Request Amendments to Your Health Information: You have the right to request, unless treated in Student Health, that we amend your health information maintained in your medical record file or billing records. If you wish to amend your records, please obtain and complete a *Request to Amend Protected Health Information Form* from your local site of service or online at KeckMedicine.org. You may submit your completed request to the Keck Medicine of USC Health Information Management department. We will comply with your request unless we believe that the information that would be amended is already accurate and complete or other special circumstances apply. We may deny your request but will provide you with a written explanation if we do so, and you may appeal to us in writing. If we deny your request to amend your record, a copy of your request may be added to your record if you direct us to file it.

Even if we deny your request for amendment, you have the right to submit a written addendum, not to exceed 250 words, with respect to any item or statement in your record you believe is incomplete or incorrect. If you clearly indicate in writing that you want the addendum to be made part of your medical record, we will attach it to your records and include it whenever we make a disclosure of the item or statement you believe to be incomplete or incorrect.

Right to An Accounting of Disclosures of Your Health Information: Upon written request, you may obtain a list (accounting) of disclosures of health information made by us, provided: (a) Such a period does not exceed six years; and (b) disclosures made for treatment, payment, health care operations, and certain other purposes will not be included. If you request an accounting more than once during a twelve (12) month period, we will charge you a reasonable fee. We will notify you of the cost involved in advance; you may choose to withdraw your request at that time before any costs are incurred.

If you would like to request an accounting, please obtain the Request for Accounting form from any Keck Medicine of USC site of service or online at www.KeckMedicine.org and submit your signed request to the Keck Medicine of USC Health Information Management Department.

Right to Request How Information is Provided to You: You may request, and we will try to accommodate, any reasonable written request for you to receive health information by alternative means of communication or at a different address or location. To request confidential communications, obtain the *Request for Confidential Communications by Alternative Means or Alternative Locations* form and submit it to the Office of Healthcare Compliance.

Special Notice on E-mail: You may find it convenient to communicate with Keck Medicine of USC, including a member of your treatment team, by email. We may communicate with you by email if you so request or if you initiate email communications with us. However, e-mail communications may not be encrypted and are not secure. Keck Medicine of USC cannot protect the confidentiality of your health information while it is being transmitted over the Internet and cannot prevent the forwarding of your health information to third parties once it has been sent.

Right to Request Additional Restrictions on the Use of Your Health Information: You may request that we restrict the use or disclosure of your health information. All requests for such additional restrictions must be made in writing. While we will consider a request for additional restrictions carefully, we are not required to agree to a requested restriction, except for requests to restrict disclosure of information to a health plan in cases where you have paid for the service out of pocket in full, unless the disclosure is required by law or is determined to be for treatment purposes. Keck Medicine of USC will provide you with a written response. To request a restriction, you must submit a written request to the Keck Medicine of USC Health Information Management department specifying the information you want to limit, whether the restriction applies to use, disclosure, or both, and to whom the restriction should apply (for example, disclosures to your spouse).

Right of Personal Representatives: You may exercise your rights as a patient through a Personal Representative, as defined by applicable law. A Personal Representative is an individual authorized to make health care decisions on your behalf and will be treated as you for purposes of accessing and controlling your health information, in accordance with the HIPAA Privacy Rule (45 CFR § 164.502(g)) and applicable state law.

Right to be Notified of Breach: You have the right to be notified by us if we discover a breach of your unsecured protected health information.

Right to a Paper Copy of this Notice: Upon request, you may obtain a paper copy of this Notice, even if you have agreed to receive such information electronically.

Right to Change Terms of this Notice

We may update the terms of this Notice at any time. If we update this Notice, we may make the new notice terms effective for all health information that we hold, including any information created or received prior to issuing the new Notice. If we change this notice, we will post the revised Notice in our practice areas and on our website at www.keckmedicine.org. You may also obtain any revised notice by contacting the Office of Healthcare Compliance.

Right to Further Information; Complaints

If you would like additional information about your privacy rights, are concerned that we have violated your privacy rights, or disagree with a decision that we made about access to health information, you may contact the Office of Healthcare Compliance at 1510 San Pablo St, 6th Floor, Los Angeles, CA 90033, by calling 323-442-8588 or by emailing at Privacy@med.usc.edu. You may also file a written complaint with the Secretary of the U.S. Department of Health and Human Services Office for Civil Rights, at 200 Independence Ave. SW, Washington, D.C., 20201.

We will not retaliate or take action against you if you file a complaint with us or the Secretary.

SUD PRIVACY ADDENDUM TO NOTICE OF PRIVACY PRACTICES

Certain records relating to your Substance Use Disorder (SUD) diagnosis, treatment, or referral for treatment that USC may receive from another provider subject to the federal Confidentiality of Substance Use Disorder Patient Records law and regulations (42 CFR Part 2) are protected by those regulations. These records have stricter confidentiality protections than other types of health information. This SUD Privacy Addendum describes additional rights and information related to any such SUD records.

When Keck Medicine receives SUD records from a Part 2 program, it acts as a lawful holder and may use or disclose the records as authorized by you or otherwise permitted by applicable law (including 42 CFR Part 2), subject to the additional limitations applicable to Part 2 records as set forth below, including:

- ***Consent for Future Uses and Disclosures for Treatment, Payment, and Health Care Operations:*** You can give one consent for all future uses or sharing of your SUD records for treatment, payment and health care operations purposes. This means that when Keck Medicine receives a copy of such consent, we may use and disclose those records for treatment, payment, and health care operations as permitted by the HIPAA regulations and as further detailed in the Notice of Privacy Practices, unless you revoke your consent in writing, except with respect to:
    - **Use of SUD Records in Legal Proceedings Involving You:** Your SUD records received from programs subject to 42 CFR part 2, and testimony about their contents, cannot be used or disclosed by USC in civil, criminal, administrative, or legal proceedings against you unless (1) you provide written consent, or (2) a court issues a specific order after you receive notice and an opportunity to be heard. The court order authorizing use or disclosure must be accompanied by a subpoena or other compulsory process before the requested record may be used or disclosed; and
    - **Development and Fundraising Activities:** Keck Medicine will not use or disclose SUD records for fundraising purposes without your specific, written authorization that complies with 42 CFR Part 2 and HIPAA.

KECK MEDICINE OF USC
NOTICE OF PRIVACY PRACTICES

This notice is effective as of May 1, 2026.

Please sign and date below to indicate that you have received a copy of this notice. Your signature simply acknowledges that you received a copy of this notice.

_____

Print Name (Last, First, Middle Initial)

_____

Signature

_____

Date

Inpatient Facility Directory

Hospitals maintain a directory that may include your **name, location in the hospital**, and a **general description of your condition**.

This information may be disclosed to people who ask for you by name, unless you choose to restrict this disclosure.

If you choose not to be included in the patient directory, visitors **(even those you wish to see)** will not be able to locate you in the hospital.

(initials) _____I DO NOT want my information included in the hospital's inpatient directory.

You may change this choice at any time by notifying hospital staff.