ORLANDO HEALTH®

SUBSTANCE USE DISORDER ADDENDUM TO
NOTICE OF PRIVACY PRACTICES OF ORLANDO HEALTH
Effective: July 1, 2026

Federal law protects the confidentiality of substance use disorder patient records and places additional restrictions on their use or disclosure. A substance use disorder ("SUD") is a cluster of cognitive, behavioral, and physiological symptoms indicating that the individual continues using the substance (such as drugs or alcohol, but not including tobacco or caffeine) despite significant substance-related problems such as impaired control, social impairment, risky use, and pharmacological tolerance and withdrawal. If you receive services from Orlando Health covered by such laws, Orlando Health complies with the federal Confidentiality of Substance Use Disorder Patient Records laws and regulations that protect information regarding SUD diagnosis, treatment, and referral for treatment. See 42 U.S.C. 290dd-3 and 42 U.S.C. 290ee-3 for Federal laws and 42 CFR Part 2 for Federal regulations (collectively, "Part 2").

Please note that Part 2 does not protect all SUD information that Orlando Health may have. Part 2 applies to certain programs (which could be limited to certain programs, persons, or departments of Orlando Health) that are federally funded and hold themselves out as and/or have the primary purpose of providing SUD treatment, diagnosis, or referral for treatment. Additionally, if Orlando Health receives records regarding your SUD from another Part 2 program pursuant to your specific consent, Part 2 generally will continue to protect such records. Where Part 2 is applicable, Orlando Health will not disclose your SUD records, that you are enrolled in a Part 2 program, or any other information that would identify you as having or having had a SUD (collectively, "Part 2 Records") except in compliance with this Addendum.

If Part 2 Records are disclosed to us or our business associates pursuant to your written consent for treatment, payment, and healthcare operations or are disclosed by you or another person involved in your care to a non-Part 2 provider at Orlando Health, we or our business associates may use and disclose such health information without your written consent to the extent that the Health Information Portability and Accountability Act (HIPAA) regulations permit such uses and disclosures, consistent with the provision of our notice regarding protected health information (PHI).

This Substance Use Disorder Addendum to Notice of Privacy Practices ("Addendum") supplements the Orlando Health Notice of Privacy Practices to specifically address the handling of SUD records and information in compliance with the regulations at Part 2. The provisions of this Addendum shall apply to SUD records and information maintained by Orlando Health on behalf of any Part 2 program and replace any less restrictive provisions of the Notice regarding use and disclosure of such information. The remainder of Orlando Health's Notice shall continue to apply with respect to SUD records, including situations where we will obtain your authorization, your individual rights, notices regarding electronic transmissions, and our ability to modify the Notice, including this Addendum.

We will obtain your written consent to use and disclose your Part 2 Records unless we are permitted to use and disclose Part 2 Records without your written consent consistent with Part 2. The following are certain circumstances under which we may request or require your consent to use or disclose your Part 2 Records:

- **Designated person or entities.** We may use and disclose your Part 2 Records in accordance with the consent to any person or category of persons identified or generally designated in the consent. For example, if you provide written consent naming your spouse or a healthcare provider, we will share your health information with them as outlined in your consent.
- **Single Consent for Treatment, Payment, or Healthcare Operations.** We may also use and disclose your Part 2 Records when the consent provided is a single consent for all future uses and disclosures for treatment, payment, and healthcare operations, as permitted by the HIPAA regulations, until such time as you revoke such consent in writing.
- **Central Registry or Withdrawal Management Program.** We may disclose your Part 2 Records to a central registry or to any withdrawal management or treatment program for the purposes of preventing multiple enrollments, with your written consent. For instance, if you consent to participating in a drug treatment program, we can disclose your information to the related program to coordinate care and avoid duplicate enrollment.
- **Criminal Justice System.** We may disclose information from your Part 2 Records to those persons within the criminal justice system who have made your participation in the Part 2 program a condition of the disposition of any criminal proceeding against you. The written consent must state that it is revocable upon the passage of a specified amount of time or the occurrence of a specified, ascertainable event. The time or occurrence upon which consent becomes revocable may be no later than the final disposition of the conditional release or other action in connection with which consent was given. For example, if you consent, we can inform a court-appointed officer about your treatment status as part of a legal agreement or sentencing conditions.
- **PDMPs.** We may report any medication prescribed or dispensed by us to the applicable state prescription drug monitoring program if required by applicable state law. We will first obtain your consent to a disclosure of Part 2 Records to a prescription drug monitoring program prior to reporting such information.

The following categories describe the ways that we may use and disclose your Part 2 Records without your written consent under Part 2.

- **Medical Emergencies.** We may disclose your Part 2 Records to medical personnel to the extent necessary to meet a bona fide medical emergency in which the your prior written consent cannot be obtained or in which we are closed and unable to provide services or obtain your prior written consent during a temporary state of emergency declared by a state or federal authority as the result of a natural or major disaster, until such time as we resume operations. Orlando Health will obtain your authorization prior to disclosing your information for non-emergency treatment. Orlando Health may also disclose your Part 2 Records to medical personnel of the Food and Drug Administration (FDA) who assert a reason to believe that your health may be threatened by an error in the manufacturer, labeling, or sale of a product under the FDA jurisdiction, and that your Part 2 Records will be used for the exclusive purpose of notifying you or your physicians of potential danger.
- **Research.** Under certain circumstances, Orlando Health may use and disclose your Part 2 Records without your consent for research purposes. Generally, we would first obtain your written consent; however, in certain circumstances, we may be permitted to use or disclose your Part 2 Records for research purposes without your consent to the extent permitted by HIPAA, FDA and the Department of Health and Human Services (HHS) regulations related to human subject research where a waiver of consent has been granted.
- **Management and Financial Audits and Program Evaluation.** Under certain circumstances we may use or disclose your Part 2 Records for purposes of the performance of certain program

financial and management audits and evaluations. For example, we may disclose your identifying information to any federal, state, or local government agency that provides financial assistance to the Part 2 program or is authorized by law to regulate the activities of Part 2 program. We may also use or disclose your identifying information to qualified personnel who are performing audit or evaluation functions on behalf of any person that provides financial assistance to the Part 2 program, which is a third-party payer or health plan covering you in your treatment, or which is a quality improvement organization ("QIO"), performing QIO review, the contractors, subcontractors, or legal representatives of such person or QIO, or an entity with direct administrative control over our program.

- **Fundraising.** We may use or disclose your Part 2 Records for fundraising purposes. You have the right to elect not to receive such communications. Please send an email to OrlandoHealthGiving@OrlandoHealth.com if you would like to stop receiving such communications.
- **Public Health.** We may use or disclose to a public health authority your Part 2 Records for public health purposes. However, the contents of the information from the Part 2 Records disclosed will be de-identified in accordance with the requirements of the HIPAA regulations, such that there will be no reasonable basis to believe that the information can be used to identify you.
- **Court Order.** We may use or disclose your Part 2 Records consistent with an appropriate court order issued under Part 2's requirements.

Any Part 2 Record, or testimony relaying the content of such Part 2 Records, shall not be used or disclosed in a civil, administrative, criminal, or legislative proceeding against you unless you provide specific written consent (separate from any other consent) or a court issues an appropriate order. Your Part 2 Records will only be used or disclosed based on a court order after notice and an opportunity to be heard is provided to you, Orlando Health or other holders of the Part 2 Record in accordance with Part 2. A court order authorizing use or disclosure of Part 2 Records must be accompanied by a subpoena or other similar legal mandate compelling disclosure before the Part 2 Records may be used or disclosed.

Part 2 does not protect health information about a crime committed on Orlando Health's premises or against any Orlando Health personnel or about any threat to commit such crime. Part 2 also does not prohibit the disclosure of health information by Orlando Health to report suspected child abuse or neglect under state law to appropriate state or local authorities. The restrictions on use and disclosure in Part 2 do not apply to communications of Part 2 Records between or among personnel having a need for them in connection with their duties that arise out of the provision of diagnosis, treatment, or referral for treatment of patients with SUD if the communications are within the program (or with an entity that has direct administrative control over the program the communications between a part 2 program) and to communications of Part 2 Records to a qualified service organization if needed by the qualified service organization to provide services to or on behalf of Orlando Health (similar to provisions herein regarding Business Associates). To the extent applicable state law is even more stringent than Part 2 on how we may use or disclose your health information, we will comply with the more stringent state law.

NOTICE OF REDISCLOSURE

PHI that is disclosed pursuant to this Addendum may be subject to redisclosure by the recipient and no longer protected by HIPAA. Law applicable to the recipient may limit their ability to use and disclose the PHI received, such as if they are another covered entity subject to HIPAA or a program or entity subject to Part 2.

COMPLAINTS

If at any time you believe your privacy rights have been violated, you may file a complaint with us. If you file a complaint, we will not retaliate against you or change our treatment of you in any way. If you wish to file a complaint with us, please submit it in writing to our Chief Privacy Officer at the address or email provided in the contact section below.

If you wish to file a complaint with the Secretary of the United States Department of Health and Human Services, please go to the website of the Office for Civil Rights (www.hhs.gov/ocr/hipaa/), call 202-619-0257 (toll free 877-696-6775), or mail to: Secretary of the US Department of Health and Human Services, 200, Independence Ave S.W., Washington, D.C. 20201

CONTACT

If you have any questions about this addendum,
please refer to our website, orlandohealth.com,
or you may contact the Chief Privacy Officer by telephone
at (888) 464-6747, email to
PrivacyandInformationSecurity@OrlandoHealth.com or
mail: Orlando Health, MP 29,
1414 Kuhl Ave., Orlando, FL 32806.