

(Sample in use as of 9/22/2026)

Notice of Privacy Practices of Professionals Resource Network, Inc.

This notice describes: HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED; YOUR RIGHTS WITH RESPECT TO YOUR HEALTH INFORMATION; HOW TO FILE A COMPLAINT CONCERNING A VIOLATION OF THE PRIVACY OR SECURITY OF YOUR HEALTH INFORMATION, OR OF YOUR RIGHTS CONCERNING YOUR INFORMATION.

YOU HAVE A RIGHT TO A COPY OF THIS NOTICE (IN PAPER OR ELECTRONIC FORM) AND TO DISCUSS IT WITH THE PRN CHIEF OPERATING OFFICER, WHO CAN BE REACHED BY PHONE AT [REDACTED] AND BY EMAIL TO: [REDACTED] IF YOU HAVE ANY QUESTIONS.

Our Privacy Policy

Professionals Resource Network, Inc. ("PRN") operates the State of Florida's impaired practitioner program ("Program") for physicians and many other types of health care practitioners. Federal law protects the confidentiality of substance use disorder patient records (42 C.F.R. Part 2). This includes substance use disorder records relating to certain practitioners in the Program. If you are in the Program relating to a substance use disorder, this Notice of Privacy Practices describes your rights and our duties under federal law. PRN is committed to protecting the confidentiality of substance use disorder records relating to Program referrals and participants as required by federal law in operating the Program.

Records

The confidentiality provisions of 42 C.F.R. Part 2 apply to records of practitioners who have applied for or been given diagnosis, treatment, or referral for treatment for a substance use disorder at the Program operated by PRN. 42 C.F.R. Part 2 and the related provisions of this Notice do not apply to the records of practitioners in the Program who have not been diagnosed with a substance use disorder or referred by PRN for treatment for a substance use disorder. PRN does not itself provide treatment.

As used in this Notice, records generally means any information, whether recorded or not, created by, received, or acquired by PRN relating to a practitioner who has applied for or been given diagnosis, treatment, or referral for treatment for a substance use disorder at the Program operated by PRN. This includes information relating to substance use disorder diagnosis, treatment and referral for treatment.

Use or Disclosure of Records Without Consent

PRN is required or authorized to use or disclose records without your consent under certain circumstances, including:

- Management audits, financial audits, and Program evaluation. Records may be disclosed as part of an audit of PRN or evaluation of the Program. Without limitation, audits may be performed by governmental entities that provide financial assistance to PRN or who are authorized by law to regulate the activities of PRN, quality improvement organizations, and independent auditors engaged by PRN.
- Criminal activity. Federal law does not protect information directly related to the commission of a crime on Program premises or against Program personnel or to a threat to commit such a crime, limited to the circumstances of the incident, including the status of the individual committing or threatening to commit the crime, that individual's name and address, and that individual's last known whereabouts. Federal law does not protect information about suspected child abuse or neglect from being reported under state law to the appropriate state or local authorities.

- Qualified service organizations. Consent is not required for communication between PRN and a qualified service organization of information needed by the qualified service organization to provide services to or on behalf of the Program (e.g., data processing, bill collecting, laboratory analyses, legal services, accounting services).
- Medical emergencies. Records may be disclosed to medical personnel to the extent necessary to meet a bona fide medical emergency in which your prior written consent cannot be obtained.
- Scientific research. Records may be disclosed for scientific research purposes in certain limited and restricted circumstances as provided by 42 C.F.R. § 2.52, including in compliance with federal Department of Health and Human Services regulations regarding the protection of human subjects.
- Disclosures for public health. Records may be disclosed for public health purposes to a public health authority provided the information has been de-identified such that there is no reasonable basis to believe that the information can be used to identify the practitioner.

Use or Disclosure of Records With Consent

Generally, PRN may not say to a person outside PRN that a practitioner is in the Program or otherwise disclose any information identifying a Program participant or referral as having or having had a substance use disorder, unless the practitioner consents in writing or the disclosure is authorized by court order. PRN will make uses and disclosures of records subject to 42 C.F.R. Part 2 that are not described in this Notice only with the practitioner's written consent. The types of uses and disclosures of records that require written consent include, without limitation, disclosures of records to the following:

- License regulators. As a precondition to participating in the Program, you must authorize PRN to disclose records to your regulator(s), which depending on your license type may include the Florida Department of Health ("DOH"), Florida Department of Business and Professional Regulation ("DBPR"), and/or license board (Board of Medicine, Board of Pharmacy, etc.).
- Approved evaluators. In order to have an evaluation facilitated by PRN and conducted by an approved evaluator as required by the Program, you must consent to the disclosure of all applicable records to the evaluator including records relating to your referral to PRN.
- Approved treatment programs and treatment providers. PRN may need to disclose records to your approved treatment programs and treatment providers so that PRN may monitor your progress in treatment.
- Facilitated group leaders. If you are required to participate in a facilitated group, consent is required to share records relating to your program participation with the facilitated group leader.
- Workplace monitors. If you are required by your Program participant contract to have a workplace monitor, consent is required to share records with the workplace monitor.

A practitioner may provide a single consent for all future uses or disclosures or records for treatment, payment, and health care operations purposes. Records that are disclosed by PRN to another 42 C.F.R. Part 2 program, covered entity, or business associate pursuant to the practitioner's written consent for treatment, payment, and health care operations may be further disclosed by that Part 2 program, covered entity, or business associate, without the practitioner's written consent, to the extent the HIPAA regulations permit such disclosure. PRN may use or disclose records to fundraise for the benefit of the Program only if you are first provided with a clear and conspicuous opportunity to elect not to receive fundraising communications.

Revocation of Consent

You may revoke a prior written consent to use and disclose records, as provided by 42 C.F.R. sections 2.31 and 2.35. You have the right to revoke a consent in writing, except to the extent that PRN has already acted in reliance on the consent. Actions taken by PRN in reliance on your consent to disclose records to your license

regulators may include, but are not limited to, admitting you into the Program or entering into a participant contract (monitoring contract) with you, as well as reporting your case to DOH, DBPR and/or license board pursuant to Section 456.076, Florida Statutes and PRN's contracts with DOH and DBPR.

Subject to the limitations above, to revoke a written consent to use or disclose records, you should contact your PRN case manager or the PRN Chief Operating Officer via email to admin@flprn.org and provide written notice of the consent(s) you wish to revoke and an effective date of the revocation(s), if applicable.

Use of Records in Proceedings Against the Practitioner

Records, or testimony relaying the content of such records, shall not be used or disclosed in any civil, administrative, criminal, or legislative proceedings against the practitioner unless based on specific written consent given by the practitioner, or a court order. As a precondition to entering the Program, a practitioner must consent in writing to the use and disclosure of their records by PRN to their license regulator (DOH, DBPR, and/or license board as applicable) if the practitioner is terminated from the Program for noncompliance and otherwise as provided by Section 456.076, Florida Statutes, and PRN's contracts with DOH and DBPR. Copies of PRN's contracts with DOH and DBPR are available upon request from PRN and online from the Florida Department of Financial Services Florida Accountability Contract Tracking System (FLDFS FACTS) at <https://facts.fldfs.com/Search/ContractSearch.aspx>. If PRN makes a disclosure of records to DOH, DBPR and/or the license board upon the practitioner's termination from the Program, then those records may be used in administrative proceedings brought by the DOH, DBPR, and/or license board against the practitioner.

In other situations, where consent has not been given, records shall only be used or disclosed by PRN based on a court order after notice and an opportunity to be heard is provided to the practitioner or the holder of the record, where required by 42 U.S.C. § 290dd-2 and 42 C.F.R. Part 2. A court order authorizing use or disclosure must be accompanied by a subpoena to PRN or other similar legal mandate compelling disclosure before the record is used or disclosed.

Your Rights With Respect to PRN Records

You as a practitioner in the Program as a referral or participant have certain rights with respect to your PRN file records as provided by 42 C.F.R. Part 2. You have the right to request restrictions of disclosures made with prior consent for purposes of treatment, payment, and health care operations, as provided in 42 C.F.R. § 2.26. You have the right to request and obtain restrictions of disclosures of records under 42 C.F.R. Part 2 to your health plan for those services for which you have paid in full, in the same manner as 45 C.F.R. § 164.522 applies to disclosures of protected health information.

You have the right to an accounting of disclosures of records made by PRN with your consent for the past 3 years, as provided in 42 C.F.R. § 2.25. For disclosures made for treatment, payment, and health care operations purposes, this accounting includes only those disclosures made through an electronic health record. This accounting must meet the requirements of 45 C.F.R. §164.528(a)(2) and (b)-(d), which generally requires the date of the disclosure, identity and address of the recipient of the records, a brief description of the records disclosed, and a brief statement of the purpose of the disclosure. You similarly have the right to a list of disclosures by an intermediary for the past 3 years as provided in 42 C.F.R. § 2.24. You have the right to elect not to receive fundraising communications from PRN.

You have the right to obtain a paper or electronic copy of this notice from PRN upon request. You have the right to request additional information about this notice or discuss this notice with the following designated contact person:

PRN Chief Operating Officer
904-277-8004
admin@flprn.org

To exercise any of these rights, contact your PRN case manager or the PRN designated contact person above and provide the nature of your request and all applicable information.

PRN's Duties With Respect to Records Subject to 42 C.F.R. Part 2

PRN is required by law to maintain the privacy of records, to provide Program referrals and participants with notice of PRN's legal duties and privacy practices with respect to records, and to notify affected Program referrals and participants following a breach of unsecured records.

PRN is required to abide by the version of this Notice of Privacy Practices that is currently in effect. PRN reserves the right to change the terms of this Notice of Privacy Practices and to make the changes effective for records that it maintains. When PRN updates or otherwise changes this Notice of Privacy Practices, PRN will publish the new version on its website and send notice of the change electronically to all current Program referrals and participants.

Complaints

If you believe that your privacy rights have been violated, you can file a complaint with PRN. The complaint must be submitted in writing to the attention of the Medical Director, PRN, P.O. Box 16510, Fernandina Beach, FL 32035-3126. A complaint may also be submitted to PRN via email to admin@flprn.org. The complaint should name the person that is the subject of the complaint and describe the acts or omissions believed to be in violation of 42 C.F.R. Part 2.

The PRN Medical Director or designee will review the case file and the complaint in an effort to verify the facts and assess the allegations. PRN will provide a response to the complainant within thirty (30) days of the receipt of the complaint. If necessary, the PRN Medical Director or designee will contact the complainant to discuss the complaint and any proposed resolution.

If you believe your privacy rights have been violated, you may also file a complaint with the Secretary of the Department of Health and Human Services pursuant to 42 C.F.R. § 2.4 and 45 C.F.R. § 160.306. PRN will not retaliate against any person who files a complaint with PRN and/or the Secretary of the Department of Health and Human Services.

Signature: _____

Date: _____