



**Wright Medical Technology, Inc.**

**Notice of Privacy Practices**

**THIS NOTICE DESCRIBES HOW PROTECTED MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GAIN ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.**

1. Wright Medical Technology, Inc. is permitted to make uses and disclosures of protected health information for treatment, payment and health care operations, as described in the following examples:
  - a. For treatment – for example, we will disclose protected information to health care providers so that they know what benefits are available to you under the plan.
  - b. For payment – for example, we will use protected information to process bills for payment under the plan.
  - c. For health care operations – for example, we will use protected information to advise providers regarding your eligibility for benefits under the plan.
2. Wright Medical Technology, Inc. is permitted or required, under specific circumstances, to use or disclose protected health information without the individual's written authorization
3. Other uses and disclosures will be made only with the individual's written authorization, and the individual may revoke such authorization.
4. Wright Medical Technology, Inc. as a plan sponsor may receive protected health information from a group health plan, or a health insurance company.
5. The Individual has the following rights regarding protected health information:
  - a. The right to request restrictions on certain uses and disclosures of protected health information. Wright Medical Technology, Inc. is not required to agree to a requested restriction, however.
  - b. The right to receive confidential communications of protected health information, as applicable.

- c. The right to inspect and copy protected health information, as provided in the Privacy Regulation.
  - d. The right to amend protected health information, as provided in the Privacy Regulation.
  - e. The right to receive an accounting of disclosures of protected health information.
  - f. The right to obtain a paper copy of the Notice from the covered entity upon request. This right extends to an individual who has agreed to receive the Notice electronically.
6. Wright Medical Technology, Inc. is required by law to maintain the privacy of protected health information and to provide individuals with notice of its legal duties and privacy practices with respect to protected health information.
7. Wright Medical Technology, Inc. is required to abide by the terms of the Notice currently in effect.
8. Wright Medical Technology, Inc. reserves the right to change the terms of this Notice. The new Notice provisions will be effective for all protected health information that it maintains.
9. Wright Medical Technology, Inc. will provide individuals or patients with a revised Notice by mail if this Notice is revised.
10. Individuals may complain to Wright Medical Technology, Inc. and to the Secretary of the Department of Health and Human Services, without fear of retaliation by the organization, if they believe their privacy rights have been violated. Any individual who wants to file a complaint may do so in writing by contacting Wright Medical Technology, Inc.'s designated Privacy Official. Please contact your local Human Resources Department to find out how to contact our Privacy Official.
11. Wright Medical Technology, Inc.'s contact person for matters relating to complaints is:
  - a. Ethics Officer
  - b. 901-867-9971
  - c. 5677 Airline Road  
Arlington, TN 38002
12. This Notice is first in effect on April 14, 2004.