Notice of Privacy Practices

Effective Date: [Insert Date]

At **Reclaim, LLC**, your privacy and the confidentiality of your health information are of the utmost importance to us. We are committed to protecting your personal information and ensuring that it is used appropriately in accordance with the Health Insurance Portability and Accountability Act (HIPAA).

This notice outlines how we use and protect your health information, what rights you have regarding your information, and how you can access and control it.

1. Uses and Disclosures of Health Information

We collect and use your health information for the purpose of providing healthcare services. This includes:

- **Treatment**: We use your information to provide diagnosis, treatment, and care planning.
- **Payment**: Your health information is used to bill and collect payment for healthcare services provided.
- **Healthcare Operations**: We may use your information for quality assurance, case management, and other operational purposes.
- Appointment Reminders: We may contact you to remind you of upcoming appointments.

2. Your Health Information Rights

You have the following rights regarding your health information:

- **Right to Access**: You may request a copy of your health records.
- Right to Amend: If you believe your records are incorrect, you can request an amendment.
- Right to Request Restrictions: You may ask us to limit how your information is used or disclosed.
- **Right to Confidential Communications**: You may request that we communicate with you in a specific way (e.g., by phone or email).

3. Safeguarding Your Information

We take appropriate steps to protect your personal health information, including:

- Using secure communication methods for telehealth and email correspondence.
- Storing your records in secure, encrypted systems.

4. Sharing Your Information

We will not share your health information with third parties without your permission unless required by law, such as in cases of legal obligations or emergencies.

5. Complaints

If you believe your privacy rights have been violated, you have the right to file a complaint. You can contact us directly or file a complaint with the U.S. Department of Health and Human Services.

Contact Information:

For any questions or concerns regarding your privacy or this Notice, please contact: **Reclaim, LLC**

PO Box 8162

Fayetteville, AR 72703 info@reclaimllc.com

Acknowledgment of Receipt:

I acknowledge that I have received the Notice of Privacy Practices from **Reclaim**, **LLC** and understand how my health information may be used and disclosed.

Signature: ˌ	 	 	 	
Date:				