

Synapse NeuroRehab & Wellness

Notice of Privacy Practices

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Effective date: 10/16/26 | Privacy contacts: Brittney Hooker, Molly Brown

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.

Synapse NeuroRehab & Wellness ("Synapse") respects your privacy. This notice describes our duties, your rights, and how we use and disclose protected health information (PHI) under HIPAA and other applicable laws.

1. Our responsibilities

We are required to protect the privacy and security of your PHI, provide this notice, follow its terms while in effect, and notify you of breaches of unsecured PHI when required by law. We will not use or disclose your PHI other than as described here unless you authorize it in writing or law otherwise permits or requires it.

2. How we use and share information

Treatment: We may use and share PHI to evaluate, treat, coordinate, and manage your care, including communicating with referring physicians, neurologists, hospitals, and other providers.

Payment: We may use and share PHI to verify coverage, obtain authorizations, submit claims, and collect payment.

Health care operations: We may use and share PHI to manage our practice, improve quality, train staff, conduct audits, and support compliance and business administration.

Other permitted or required disclosures: Subject to applicable conditions, we may disclose PHI for public health and safety, reporting abuse or neglect, health oversight, research, workers' compensation, certain legal proceedings and law enforcement requests, coroners or medical examiners, organ donation, disaster relief, and other purposes permitted or required by law. We may use business associates who are contractually obligated to safeguard PHI.

3. Your choices and authorizations

You may tell us your preferences about sharing relevant information with family members, friends, caregivers, or others involved in your care or payment, and for disaster relief. When you cannot express a preference, we may share information as permitted by law and based on professional judgment.

We generally need your written authorization for uses and disclosures of psychotherapy notes (where applicable), marketing uses requiring authorization, sales of PHI, and other purposes not described here. You may revoke authorization in writing, except to the extent we already relied on it.

If Synapse conducts fundraising, you may opt out of future fundraising communications. If protected Part 2 records are used for fundraising, we will provide the required advance notice and opportunity to elect not to receive such communications.

4. Your rights

Access: You may inspect or obtain copies of PHI in a designated record set, including an electronic copy when applicable. We generally respond within 30 days, with a permitted extension and lawful cost-based fees.

Amendment: You may ask us to correct information you believe is wrong or incomplete. We may deny certain requests and explain why in writing.

Confidential communications: You may ask us to contact you by a reasonable alternative method or at another location; we will accommodate reasonable requests.

Restrictions: You may ask us to limit certain uses or disclosures. We generally need not agree, but must honor a qualifying request not to disclose information to a health plan for payment or operations when you (or someone on your behalf other than the plan) paid in full out of pocket for the relevant service, unless disclosure is required by law.

Accounting: You may request an accounting of certain disclosures for the preceding six years, subject to exceptions. One accounting in a 12-month period is free; additional requests may incur a reasonable fee.

Notice and representation: You may request a paper copy of this notice at any time, even if you agreed to electronic delivery. A legally authorized representative may exercise rights on your behalf, subject to verification and applicable law.

5. Special protections for certain records

We receive records from outside providers. Some records, including substance use disorder patient records protected by 42 CFR Part 2, may carry additional legal protections. When we receive or maintain Part 2 records, we will use or disclose them only as authorized or otherwise permitted by applicable law. Part 2 records generally may not be used or disclosed in civil, criminal, administrative, or legislative proceedings against a patient without specific written consent or a qualifying court order and accompanying legal process as required by law. Additional state or federal confidentiality requirements will be honored when applicable.

6. Security and changes to this notice

We maintain administrative, technical, and physical safeguards for PHI, including access controls, workforce training, and secure recordkeeping practices. We may revise this notice and apply revised terms to PHI already maintained. The current notice will be posted on our website, available at our office, and provided on request.

7. Questions, requests, and complaints

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You may also complain to the U.S. Department of Health and Human Services, Office for Civil Rights, at <https://www.hhs.gov/hipaa/filing-a-complaint/index.html> or 1-877-696-6775. We will not retaliate against you for filing a complaint.