Notice of Privacy Practices

Your Information. Your Rights. Our Responsibilities.

THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED, HOW YOU CAN ACCESS IT, AND YOUR PRIVACY RIGHTS.

Please review it carefully. You have the right to receive a paper or electronic copy and to discuss this notice with the practice.

Practice	Nando Therapy (Rincon Sunrise Counseling LLC)
Privacy Contact	Nathanael Schlecht, LAC
Effective Date	August 14, 2026
Contact	[Practice phone] | [Practice email]
Website / Address	nandotherapy.com | [Practice office address]

Your Rights

You have important rights concerning your protected health information (PHI). We will help you exercise these rights as required by law.

Get a copy of your record. You may ask to inspect or receive an electronic or paper copy of your health record and other health information we maintain about you. We generally respond within the time required by law and may charge a reasonable, cost-based fee when permitted.

Ask us to amend information. If you believe information in your record is incorrect or incomplete, you may ask us to amend it. We may deny the request in some circumstances, but we will explain a denial in writing.

Request confidential communications. You may ask us to contact you in a particular way or at a particular address. We will accommodate reasonable requests.

Request restrictions. You may ask us not to use or disclose certain information for treatment, payment, or health care operations. We are not always required to agree. If you pay in full out of pocket for a service and ask us not to disclose that service to your health plan for payment or operations, we will honor the request unless disclosure is required by law.

Receive an accounting of certain disclosures. You may request a list of certain disclosures of your PHI made during the six years before your request. The accounting does not include every type of disclosure, such as many disclosures for treatment, payment, or health care operations.

Get another copy of this notice. You may request a paper copy at any time, even if you previously agreed to receive it electronically.

Choose a personal representative. A person who has legal authority to act for you may exercise your privacy rights. We may request documentation showing that authority.

File a privacy complaint. You may complain to Nando Therapy or to the U.S. Department of Health and Human Services Office for Civil Rights if you believe your privacy rights have been violated. We will not retaliate against you for filing a complaint.

Your Choices

For some disclosures, you may tell us what you prefer. When applicable, you may agree or object to sharing information with family, close friends, or others involved in your care or payment for your care, and to certain disclosures during an emergency or disaster-relief situation.

We generally will not use or disclose your information for the following purposes without your written authorization:

- Marketing that requires your authorization.
- Selling your protected health information.
- Most uses or disclosures of psychotherapy notes.

If you give us written authorization, you may revoke it in writing at any time, except to the extent we have already relied on it.

How We May Use and Disclose Your Information

HIPAA permits or requires us to use and disclose PHI in certain circumstances. We limit uses and disclosures to what is permitted by law and, when applicable, to the minimum necessary information.

Treatment. We may use your information to provide, coordinate, or manage your care and may share information with other health professionals involved in your treatment when permitted by law.

Payment. We may use or disclose information to obtain payment for services, process claims, verify benefits, collect balances, or address billing matters.

Health care operations. We may use information to operate the practice, support quality improvement, conduct compliance activities, manage services, and contact you about your care.

Business associates. We may share PHI with vendors who perform services for the practice when a HIPAA-compliant business associate agreement or other legally appropriate protection is required.

Public health and safety. We may disclose information when permitted or required for public health activities, reporting suspected abuse or neglect, preventing or reducing a serious threat to health or safety, or other legally authorized public-health purposes.

Health oversight. We may disclose information to authorized oversight agencies for audits, investigations, inspections, licensing, or disciplinary activities.

Required by law. We may disclose information when federal, state, or local law requires us to do so.

Legal proceedings. We may disclose information in response to a valid court or administrative order, subpoena, discovery request, or other lawful process, subject to HIPAA, Arizona confidentiality law, privilege, and other applicable protections.

Law enforcement and government functions. We may disclose information for certain law-enforcement purposes or special government functions when the law permits or requires it.

Workers' compensation. We may disclose information as authorized by and to the extent necessary to comply with workers' compensation or similar programs.

Coroners, medical examiners, and funeral directors. We may disclose information as permitted by law when necessary for these functions.

Research. We may use or disclose information for research only when the applicable legal requirements have been satisfied.

Mental Health and Psychotherapy Information

Because Nando Therapy provides behavioral health services, your records may receive protections beyond the general HIPAA rules. Arizona law recognizes a confidential behavioral health professional-client relationship and protects behavioral health records. We will follow applicable Arizona law when it provides greater privacy protection than federal law.

Psychotherapy notes, when maintained separately from the rest of the medical record and meeting the HIPAA definition, receive special protection. Most uses or disclosures of psychotherapy notes require your written authorization unless a specific legal exception applies.

Substance Use Disorder Records

If Nando Therapy maintains or receives substance use disorder patient records that are protected by 42 CFR Part 2, those records may have additional federal confidentiality protections. To the extent Part 2 applies, such records will not be used or disclosed in civil, criminal, administrative, or legislative investigations or proceedings against you unless permitted by Part 2, such as with your written consent or a qualifying court order and subpoena.

Our Responsibilities

- We are required by law to maintain the privacy and security of your protected health information.
- We must follow the privacy practices described in the current version of this notice.
- We will provide you with a copy of this notice upon request.
- We will notify affected individuals as required by law if a breach occurs that may have compromised the privacy or security of protected health information.
- We will not use or disclose your information in a way that is not described in this notice unless you authorize it in writing or another law permits or requires the use or disclosure.

Electronic Communications, Telehealth, and Client Portal

Nando Therapy may use secure electronic systems, including an electronic health record and client portal, to provide services, communicate with you, maintain records, and support practice operations. Telehealth and electronic communications involve privacy and security risks that are addressed separately in the practice's informed-consent and communication policies.

You may request that we use a particular reasonable method or destination for confidential communications. Please avoid sending highly sensitive clinical information through ordinary email or text unless you understand and accept the privacy limitations of that method.

Changes to This Notice

We may change the terms of this Notice of Privacy Practices. A revised notice may apply to all PHI we maintain, including information created or received before the revision. The current notice will be available upon request and, when applicable, through our website or client portal.

Questions or Complaints

For questions about this notice, to exercise a privacy right, or to submit a privacy complaint, contact:

Privacy Contact	Nathanael Schlecht, LAC
Phone	[Practice phone]
Email	[Practice email]
Mailing / Office Address	[Practice office or mailing address]

You may also file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights (OCR), using OCR's complaint process at hhs.gov/hipaa/filing-a-complaint or by contacting HHS at 1-877-696-6775. Nando Therapy will not retaliate against you for filing a complaint.

Acknowledgment

HIPAA generally requires covered health care providers with a direct treatment relationship to make a good-faith effort to obtain written acknowledgment that the Notice of Privacy Practices was provided. Signing an acknowledgment confirms receipt of the notice; it does not waive any privacy right.

Client name: _____

Client signature: _____

Date: _____

Practice reference: HIPAA Privacy Rule, 45 CFR 164.520; current HHS model NPP (revised February 2026); applicable Arizona confidentiality requirements, including A.R.S. §§ 32-3283 and 36-509.