

Notice of Privacy Practices



Propel Therapy

Effective Date: June 1st, 2026

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

Propel Therapy is committed to protecting the privacy and security of your health information. This Notice of Privacy Practices describes how we may use and disclose your Protected Health Information (PHI), your rights regarding your health information, and our legal obligations under the Health Insurance Portability and Accountability Act (HIPAA).

Our Responsibilities

Propel Therapy is required by law to:

- Maintain the privacy and security of your Protected Health Information (PHI)
- Provide you with this Notice of Privacy Practices
- Follow the terms of this notice currently in effect
- Notify you if a breach occurs that may have compromised the privacy or security of your information

How We May Use and Disclose Your Health Information

For Treatment

We may use and disclose your health information to provide, coordinate, and manage your healthcare services.

Examples include:

- Communicating with your physician or other healthcare providers
- Coordinating care with specialists, home health agencies, wound clinics, hospitals, caregivers, or other members of your healthcare team
- Developing and implementing treatment plans

For Payment

We may use and disclose your health information to obtain payment for services provided.

Examples include:

- Billing insurance companies
- Verifying insurance coverage
- Obtaining prior authorizations
- Processing claims and appeals

For Healthcare Operations

We may use and disclose health information to support our business operations and improve the quality of care.

Examples include:

- Quality assurance activities
- Compliance reviews and audits
- Staff training and education
- Business planning and management

Additional Uses and Disclosures Permitted by Law

We may disclose your information without your authorization when required or permitted by law, including:

- Public health reporting
- Reporting abuse, neglect, or domestic violence
- Health oversight activities
- Judicial or administrative proceedings
- Law enforcement requests
- Coroners, medical examiners, and funeral directors
- Organ and tissue donation
- Workers' compensation claims
- To prevent a serious threat to health or safety

Uses and Disclosures Requiring Authorization

We will obtain your written authorization before:

- Using or disclosing psychotherapy notes (if applicable)
- Using your information for marketing purposes where required by law
- Selling your health information
- Any other use or disclosure not otherwise permitted under HIPAA

You may revoke an authorization at any time in writing.

Your Rights Regarding Your Health Information

Right to Access

You have the right to inspect and obtain a copy of your health records, subject to certain limitations.

Right to Request Amendments

You may request corrections to your health records if you believe information is inaccurate or incomplete.

Right to Request Restrictions

You may request restrictions on certain uses and disclosures of your information. While we will consider requests, we may not be required to agree to all restrictions.

Right to Confidential Communications

You may request that we communicate with you in a specific way or at a specific location.

Right to Receive an Accounting of Disclosures

You may request a list of certain disclosures of your health information made by Propel Therapy.

Right to Receive a Copy of This Notice

You may request a paper or electronic copy of this Notice at any time.

Right to File a Complaint

If you believe your privacy rights have been violated, you may file a complaint without fear of retaliation.

Complaints may be submitted to:

Propel Therapy Privacy Officer

Propel Therapy

Phone: (402) 714-3575

Email: jenn@propeltherapyne.com

You may also file a complaint with:

U.S. Department of Health and Human Services

Office for Civil Rights

<https://www.hhs.gov/ocr/privacy/hipaa/complaints/>

Mobile & Electronic Communications

Propel Therapy may communicate with patients through phone calls, voicemail, email, text messages, electronic health record systems, and other communication methods. While we take reasonable precautions to protect information, electronic communications may carry certain privacy risks.

By providing your contact information, you authorize Propel Therapy to communicate with you regarding appointments, treatment, billing, and related healthcare matters.

Business Associates

Propel Therapy may share information with trusted third-party vendors and service providers who assist with operations, billing, electronic records, scheduling, compliance, and other healthcare functions. These entities are required to safeguard your information in accordance with HIPAA.

Changes to This Notice

Propel Therapy reserves the right to modify this Notice at any time. Updated notices will be posted on our website and made available upon request.

Contact Information

Propel Therapy

Phone: (402) 714-3575

Email: jenn@propeltherapyne.com

Website: www.propeltherapyne.com

By receiving services from Propel Therapy, you acknowledge that this Notice of Privacy Practices has been made available to you.