

NOTICE OF PRIVACY PRACTICES
Keystone Therapy Services, LLC
Effective Date: February 16, 2026

**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.**

Keystone Therapy Services, LLC is committed to protecting the privacy and confidentiality of your protected health information ("PHI"). This Notice describes how we may use and disclose your health information and your rights regarding that information.

We are required by law to maintain the privacy of your PHI, provide you with this Notice, and follow the terms currently in effect.

HOW WE MAY USE AND DISCLOSE YOUR HEALTH INFORMATION

We may use and disclose your PHI for the following purposes:

Treatment

We may use and disclose your health information to provide, coordinate, or manage your healthcare and related services. For example, we may share information with physicians, occupational therapists, or other healthcare providers involved in your care.

Payment

We may use and disclose your PHI to bill and collect payment from health plans, insurance companies, Medicaid, or other third parties.

Healthcare Operations

We may use and disclose your PHI for our healthcare operations, including:

- Quality assessment and improvement activities
- Staff training and supervision
- Licensing and accreditation
- Administrative and business management

Other Permitted and Required Uses and Disclosures

We may also use or disclose your PHI:

- When required by federal or state law
- For public health activities
- To report abuse, neglect, or domestic violence
- For health oversight activities
- For judicial and administrative proceedings, when permitted by law
- For law enforcement purposes, when permitted by law
- To prevent a serious threat to health or safety

SPECIAL PROTECTIONS FOR SUBSTANCE USE DISORDER RECORDS (42 CFR PART 2)

Certain records related to substance use disorder diagnosis, treatment, or referral are protected under federal law (42 CFR Part 2) and HIPAA.

For these records:

- We generally may not use or disclose substance use disorder records without your written consent.
- These records may not be used or disclosed in civil, criminal, administrative, or legislative proceedings without your written consent or a court order.
- A court order authorizing disclosure must provide notice and an opportunity for you or your representative to be heard.

These protections apply even if you are a minor, as permitted by law.

FUNDRAISING COMMUNICATIONS

If we ever use your information for fundraising purposes, you have the right to opt out of receiving such communications. We will not use substance use disorder treatment information for fundraising without your written authorization.

USES AND DISCLOSURES REQUIRING YOUR AUTHORIZATION

We will obtain your written authorization before using or disclosing your PHI for purposes other than those described in this Notice.

You may revoke your authorization at any time in writing.

YOUR RIGHTS REGARDING YOUR HEALTH INFORMATION

You have the following rights:

Right to Inspect and Copy

You have the right to inspect and request copies of your medical records.

Right to Request Amendments

You may request corrections to your medical record if you believe information is incorrect or incomplete.

Right to Request Restrictions

You may request limits on how we use or disclose your information. We are not required to agree to all requests.

Right to Request Confidential Communications

You may request that we contact you in a specific way (for example, by phone, email, or mail).

Right to Receive a Copy of This Notice

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

Right to an Accounting of Disclosures

You may request a list of disclosures made outside of treatment, payment, and healthcare operations.

Right to File a Complaint

You may file a complaint if you believe your privacy rights have been violated. Filing a complaint will not affect your care.

You may file a complaint with:

Keystone Therapy Services, LLC

Privacy Officer

3354 Greystone Way

Valdosta, GA

229-244-3552

amy@keystonetx.us

You may also file a complaint with the U.S. Department of Health and Human Services.

OUR RESPONSIBILITIES

We are required by law to:

- Maintain the privacy and security of your protected health information
- Provide you with this Notice
- Follow the terms of this Notice
- Notify you if a breach of your unsecured PHI occurs

We reserve the right to change this Notice at any time. The revised Notice will apply to all information we maintain and will be posted in our office and on our website.

CONTACT INFORMATION

If you have questions about this Notice, please contact:

Privacy Officer

Keystone Therapy Services, LLC

Valdosta, GA

Phone: 229-244-3552

Email: amy@keystonetx.us

This Notice is effective as of February 16, 2026.