

NOTICE OF PRIVACY PRACTICES

Effective Date: March 14, 2026

Aruepath Group LLC

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

Aruepath Group LLC is required by law to maintain the privacy of your Protected Health Information (“PHI”) and to provide you with notice of our legal duties and privacy practices with respect to PHI.

Protected Health Information (PHI) is information that may identify you and that relates to your past, present, or future physical or mental health or condition and related health care services.

This Notice of Privacy Practices describes how Aruepath Group LLC may use and disclose PHI to carry out treatment, payment, or health care operations and for other purposes that are permitted or required by law. This Notice also describes your rights regarding your PHI.

Aruepath Group LLC is required to follow the terms of this Notice. We will not use or disclose PHI about you without your written authorization, except as described in this Notice. We reserve the right to change our privacy practices and the terms of this Notice at any time. Any revised Notice will apply to all PHI we maintain.

Upon request, we will provide you with any revised Notice of Privacy Practices.

USES AND DISCLOSURES OF HEALTH INFORMATION

Aruepath Group LLC may use or disclose your PHI for the following purposes:

Treatment

Your PHI may be used to provide counseling, evaluation, and related treatment services. Information may be shared with other healthcare professionals involved in your care when appropriate.

Payment

Your PHI may be used to obtain payment for services from you, an insurance provider, or another responsible party.

Health Care Operations

Your PHI may be used for practice operations including administrative purposes, supervision, quality improvement, and compliance with applicable laws.

OTHER USES AND DISCLOSURES

Your PHI may also be disclosed when:

- Required by law
- Required by court order or legal process
- Necessary to report abuse, neglect, or domestic violence as required by law
- Necessary to prevent serious harm to you or others
- Required by public health authorities

Electronic Records, Electronic Communication, and Telehealth

Aruepath Group LLC maintains client records in electronic format and may provide counseling services through secure telehealth platforms. Reasonable safeguards are used to protect the confidentiality and security of your Protected Health Information (PHI) when stored or transmitted electronically.

Telehealth services may involve the electronic transmission of information including video, audio, and written communications. Aruepath Group LLC uses secure and HIPAA-compliant technologies to protect client privacy.

While reasonable efforts are made to maintain security, electronic communication systems may carry certain inherent risks. By participating in telehealth services or electronic communications, you acknowledge these risks and agree to the use of secure electronic technologies for communication and record keeping in accordance with HIPAA regulations.

Clients are encouraged to participate in telehealth sessions from a private location and to use secure devices when accessing the client portal or participating in telehealth services.

Any other use or disclosure of your PHI will be made only with your written authorization.

YOUR HEALTH INFORMATION RIGHTS

You have the following rights regarding your Protected Health Information:

Right to Obtain a Copy of This Notice

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

Right to Request Restrictions

You have the right to request restrictions on certain uses or disclosures of your PHI for treatment, payment, or health care operations. While Aruepath Group LLC will consider all requests, we are not required to agree to all requested restrictions.

Right to Inspect and Obtain a Copy of PHI

You have the right to access and obtain a copy of your PHI contained in a designated record set. This may include clinical records and billing records. Reasonable fees may apply for copying, mailing, and supplies used to fulfill your request(s).

Right to Request Amendments

If you believe information in your health record is incorrect or incomplete, you may request that it be amended. Requests must be submitted in writing and must include a reason supporting the requested amendment.

If your request is denied, you have the right to submit a written statement of disagreement.

Additional Health Information Rights

Right to Amend

You have the right to request that Aruepath Group LLC amend your Protected Health Information (PHI) or medical/mental health record if you believe the information we maintain about you is incorrect or incomplete.

To request an amendment, you must submit a written request and provide a reason supporting your request. We may deny your request under certain circumstances. If your request is denied, you have the right to submit a written statement of disagreement with the decision.

Right to an Accounting of Disclosures

You have the right to request a list of certain disclosures of your PHI that have been made by Aruepath Group LLC. This list does not include disclosures made for purposes of treatment, payment, or health care operations, or other disclosures permitted by law.

If you request an accounting of disclosures, the accounting may include disclosures made within a period of up to six (6) years prior to the date of your request. The first request within a 12-month period will be provided at no cost. Additional requests within the same 12-month period may be subject to a reasonable fee to cover administrative costs.

Right to Confidential Communications

You have the right to request that we communicate with you about your health information in a certain way or at a specific location. For example, you may request that communications be sent only to a specific phone number, email address, or mailing address.

Confidentiality of Substance Use Disorder Records (42 CFR Part 2)

Aruepath Group LLC provides services related to substance use counseling. Records related to the diagnosis, treatment, or referral for treatment of substance use disorders may be protected under federal law known as 42 CFR Part 2.

Under 42 CFR Part 2:

- Substance use disorder treatment records are confidential.
- These records generally cannot be disclosed without your written consent.
- Disclosure may occur only in limited circumstances permitted by federal law, such as medical emergencies, court orders, or when required by law.

Any information that identifies you as a client receiving substance use disorder treatment may not be disclosed without your written permission unless specifically permitted by law.

Federal law prohibits the unauthorized disclosure of these records.

RIGHT TO FILE A COMPLAINT

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

Complaints may be submitted in writing to:

Aruepath Group LLC

217 6th Ave N Ste 43112

Nashville, TN 37219

or emailed to: favian@aruepath.com

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

Office for Civil Rights

200 Independence Avenue, SW

Washington, DC 20201

website: www.hhs.gov

OUR RESPONSIBILITIES

Aruepath Group LLC is required to:

- Maintain the privacy of your Protected Health Information
- 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 compromise the privacy of your information