NOTICE OF PRIVACY PRACTICES

Anthony Vario, LLC

Effective date: August 8, 2026 | Privacy contact: Anthony Vario, LICSW
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THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN ACCESS THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Your Information. Your Rights. Our Responsibilities.

Anthony Vario, LLC (the Practice) is committed to protecting the privacy and security of your protected health information (PHI). This Notice explains your rights, your choices, how the Practice may use or disclose your information, and the Practice's legal duties under the Health Insurance Portability and Accountability Act (HIPAA) and other applicable laws.

Your Rights

You have the following rights regarding health information maintained by the Practice.

Inspect or obtain a copy of your record. You may ask to see or receive an electronic or paper copy of your medical record and other health information maintained by the Practice. A copy or summary will usually be provided within 30 days. A reasonable, cost-based fee may apply. Certain information, including psychotherapy notes as defined by law, may be excluded from the right of access.

Request a correction. You may ask the Practice to correct health information you believe is incorrect or incomplete. The Practice may deny the request in some circumstances and will provide a written explanation, generally within 60 days.

Request confidential communications. You may ask the Practice to contact you in a particular way or at a different address. Reasonable requests will be honored.

Request restrictions. You may ask the Practice not to use or share certain information for treatment, payment, or health care operations. The Practice is not always required to agree. If you pay in full out of pocket for a service, you may ask the Practice not to disclose information about that service to your health plan for payment or health care operations, unless disclosure is required by law.

Receive an accounting of disclosures. You may request a list of certain disclosures made during the six years before your request. The list generally does not include disclosures for treatment, payment, health care operations, disclosures you authorized, or certain other disclosures. One accounting in a 12-month period is provided without charge; a reasonable fee may apply to additional requests.

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

Choose a personal representative. A person with legal authority to act for you may exercise your privacy rights. The Practice will verify that person's authority before acting.

File a complaint. You may complain to the Practice or to the U.S. Department of Health and Human Services if you believe your privacy rights were violated. The Practice will not retaliate against you for filing a complaint.

Your Choices

In certain situations, you may tell the Practice how you want information shared. These choices may include sharing information with family members, close friends, or others involved in your care or payment

for care, and sharing information during disaster-relief efforts. If you cannot communicate your preference, the Practice may share information when professional judgment indicates it is in your best interest or when needed to lessen a serious and imminent threat to health or safety.

Written authorization is generally required for marketing, the sale of PHI, and most uses or disclosures of psychotherapy notes. Anthony Vario, LLC does not sell your PHI. The Practice does not conduct fundraising using your PHI.

How the Practice Typically Uses and Discloses Information

Treatment. The Practice may use your information and share it with health professionals involved in your care. For example, information may be shared with another treating clinician when clinically appropriate.

Payment. The Practice may use and disclose information to verify benefits, submit claims, collect payment, and coordinate billing with health plans or payment processors.

Health care operations. The Practice may use and disclose information to operate the practice, improve services, conduct quality activities, obtain professional consultation, perform credentialing or compliance functions, and contact you when necessary.

Other Uses and Disclosures Permitted or Required by Law

The Practice may use or disclose information without written authorization when applicable legal requirements and safeguards are satisfied, including for:

- Public health and safety activities, such as preventing disease, reporting adverse reactions, or preventing or reducing a serious threat to health or safety.
- Reporting suspected abuse, neglect, exploitation, or domestic violence when permitted or required by law.
- Health oversight activities, audits, inspections, licensing, and investigations authorized by law.
- Workers' compensation and similar programs authorized by law.
- Research when applicable legal requirements are met.
- Law enforcement, special government functions, or correctional institutions when authorized by law.
- A coroner, medical examiner, funeral director, or organ-procurement organization when legally appropriate.
- Judicial or administrative proceedings, including responses to qualifying court or administrative orders, subpoenas, or other lawful process.
- Any other situation in which federal or state law requires or permits disclosure.

The Practice will apply applicable federal and state laws that provide greater protection to mental health, substance-use-disorder, HIV-related, sexual-assault, domestic-violence, or other sensitive information. When a more protective law applies, the Practice will follow that law.

Substance Use Disorder Records

To the extent the Practice receives or maintains substance use disorder patient records protected by 42 CFR Part 2, those records receive additional protections. Such records generally may not be used or disclosed in civil, criminal, administrative, or legislative investigations or proceedings against you without your written consent or a qualifying court order accompanied by a subpoena or other legal mandate. If Part 2 information is used for fundraising, you must receive clear advance notice and an opportunity to opt out.

Psychotherapy Notes

Psychotherapy notes receive special protection under HIPAA. Most uses and disclosures of psychotherapy notes require a separate written authorization, except for limited uses or disclosures permitted or required by law. Psychotherapy notes are maintained separately from the clinical record when created and are not the same as routine progress notes, diagnoses, treatment plans, symptoms, test results, or summaries of treatment.

Electronic Communication and Telehealth

The Practice uses administrative, technical, and physical safeguards designed to protect PHI used in electronic records, telehealth, billing, email, and other practice systems. No electronic system can guarantee absolute security. Email, text messaging, and voicemail are intended primarily for scheduling, billing, and other administrative matters and should not be used for emergencies, urgent concerns, or lengthy clinical discussions. You may request a reasonable alternative method of confidential communication.

The Practice's Responsibilities

- Maintain the privacy and security of your PHI.
- Provide you with this Notice and follow the duties and privacy practices described in it.
- Notify you promptly when a breach of unsecured PHI requires notification.
- Use or disclose only the minimum information reasonably necessary when the minimum-necessary rule applies.
- Honor a valid written authorization and allow you to revoke it in writing, except to the extent action has already been taken in reliance on it.

Changes to This Notice

The Practice may change the terms of this Notice. Changes may apply to all PHI maintained by the Practice, including information created or received before the change. A current Notice will be available upon request and will be posted on the Practice's website when applicable.

Questions and Complaints

For questions, requests, or complaints, contact the Privacy Official:

Anthony Vario, LICSW
Anthony Vario, LLC
anthony@anthonyvariollc.com
(401) 484-1616

You may also file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, by visiting https://www.hhs.gov/hipaa/filing-a-complaint, calling 1-877-696-6775, or writing to 200 Independence Avenue, S.W., Washington, D.C. 20201. Anthony Vario, LLC will not retaliate against you for filing a complaint.

Acknowledgment of Receipt

A separate electronic acknowledgment may be used to document that you received this Notice. Signing an acknowledgment confirms receipt only; it does not waive any privacy right or authorize a use or disclosure that otherwise requires your permission.