CLIFTON PARK PHYSICAL THERAPY

NOTICE OF PRIVACY PRACTICES

Effective Date: August 10, 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.

Clifton Park Physical Therapy is committed to protecting the privacy and security of your health information. This Notice describes your rights, our responsibilities, and how we may use and disclose your protected health information ("PHI").

YOUR RIGHTS

When it comes to your health information, you have certain rights. This section explains your rights and some of our responsibilities to help you.

Get an electronic or paper copy of your medical record

You may ask to see or obtain an electronic or paper copy of your medical record and other health information we maintain about you. We will provide access, a copy, or a summary as required by applicable law, generally within the time required by HIPAA and New York law.

We may charge a reasonable fee when permitted by law. For paper copies, New York law limits charges in applicable circumstances and provides that access may not be denied solely because of inability to pay.

Ask us to correct your medical record

You may ask us to correct health information about you that you believe is incorrect or incomplete. We may deny your request in certain circumstances, but we will explain the reason for the denial in writing as required by law.

Request confidential communications

You may ask us to contact you in a specific way, such as at a particular telephone number, or to send communications to a different address. We will accommodate reasonable requests.

Ask us to limit what we use or disclose

You may ask us not to use or disclose certain health information for treatment, payment, or health care operations. We are generally not required to agree to your request. If we agree, we may still use or disclose the information when needed for emergency treatment or when otherwise permitted or required by law.

If you pay for a health care service or item out-of-pocket in full and ask us not to disclose information about that service or item to your health plan for payment or health care operations, we will honor that request unless a law requires us to disclose the information.

Get a list of certain disclosures

You may request an accounting of certain disclosures of your health information made during the six years before your request. The accounting does not include all disclosures, such as many disclosures for treatment, payment, or health care operations, or disclosures you specifically authorized or requested.

We will provide one accounting in a 12-month period without charge. We may charge a reasonable, cost-based fee for additional requests during that period.

Get a copy of this Notice

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

Choose someone to act for you

If someone has legal authority to act as your personal representative, such as through a health care power of attorney or legal guardianship, that person may exercise your rights and make choices about your health information as permitted by law. We may verify that person's authority before taking action.

File a complaint

You may file a complaint with Clifton Park Physical Therapy if you believe your privacy rights have been violated. You may also file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights. We will not retaliate against you for filing a complaint.

YOUR CHOICES

For certain health information, you may tell us your preferences about what we disclose. If you have a clear preference in the situations below, tell us what you want us to do and we will follow your instructions as required by law.

- Share relevant information with family, close friends, caregivers, or others involved in your care or payment for your care.
- Share information in a disaster-relief situation.

If you are unable to tell us your preference, such as during an emergency, we may disclose information when we determine that doing so is in your best interest and is permitted by law. We may also disclose information when needed to lessen a serious and imminent threat to health or safety.

Uses that generally require your written authorization

We will obtain your written authorization for uses or disclosures that require authorization under HIPAA or other applicable law, including most uses and disclosures for marketing, the sale of PHI, and most disclosures of psychotherapy notes if we maintain such notes.

Clifton Park Physical Therapy does not currently use PHI to conduct fundraising. If our practices change, we will follow applicable notice and opt-out requirements.

HOW WE MAY USE AND DISCLOSE YOUR HEALTH INFORMATION

We typically may use or disclose your health information without a separate authorization for treatment, payment, and health care operations, and for other purposes permitted or required by law.

Treatment

Example: We may share information with your physician or another health care professional involved in your care regarding your condition, plan of care, treatment, or progress.

Payment

Example: We may provide information to your health insurance plan, Medicare, Workers' Compensation carrier, No-Fault carrier, or another responsible payer to submit and process claims and obtain payment for services provided to you.

Health care operations

Examples: We may use or disclose information to operate our practice, improve care, conduct quality assessment, staff training, compliance activities, auditing, credentialing, business management, and evaluation of our services. We may also disclose PHI to business associates that perform services on our behalf when permitted by law and subject to applicable privacy and security requirements.

Appointment reminders and health-related communications

We may use your health information to contact you regarding appointments, scheduling, treatment, follow-up care, or other health-related services.

Public health and safety

We may use or disclose health information for public health and safety purposes when permitted or required by law, including preventing disease, reporting certain adverse events or product issues, reporting suspected abuse, neglect, or domestic violence when applicable, and preventing or reducing a serious threat to health or safety.

Research

We may use or disclose health information for health research when permitted by law and when applicable legal requirements have been satisfied.

Comply with the law

We will disclose information when federal or state law requires us to do so, including to the U.S. Department of Health and Human Services when necessary to demonstrate compliance with federal privacy law.

Organ and tissue donation

We may disclose health information to organ procurement organizations when permitted by law.

Medical examiners and funeral directors

We may disclose health information to a coroner, medical examiner, or funeral director when permitted by law.

Workers' Compensation, law enforcement, health oversight, and government functions

We may use or disclose health information for Workers' Compensation claims; for law enforcement purposes; to health oversight agencies for activities authorized by law; and for certain specialized government functions, such as military, national security, and protective services, when permitted or required by law.

Lawsuits and legal proceedings

We may disclose health information in response to a court or administrative order, subpoena, discovery request, or other lawful process when permitted or required by applicable law.

INFORMATION SUBJECT TO ADDITIONAL PRIVACY PROTECTIONS

Some types of health information may receive greater protection under New York State or federal law than under the general HIPAA rules. When another applicable law provides greater privacy protection, Clifton Park Physical Therapy will follow the more protective requirements.

This may include, when applicable, confidential HIV-related information and other specially protected information. New York law places additional restrictions on the disclosure of confidential HIV-related information.

Substance Use Disorder Records

To the extent Clifton Park Physical Therapy creates or maintains substance use disorder patient records that are subject to 42 CFR Part 2, those records receive additional federal privacy protections.

Part 2 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 court order and subpoena that meet applicable federal requirements.

OUR RESPONSIBILITIES

- We are required by law to maintain the privacy and security of your protected health information.
- We will notify you as required by law if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in the Notice currently in effect and make a copy available to you.
- We will not use or disclose your health information other than as described in this Notice unless you authorize us in writing or another use or disclosure is permitted or required by law.
- If you provide written authorization, you may revoke it in writing at any time. Revocation will not affect uses or disclosures already made in reliance on your authorization.

CHANGES TO THIS NOTICE

We may change the terms of this Notice and our privacy practices. Changes may apply to all health information we maintain about you, including information created or received before the change. The current Notice will be available upon request, posted prominently at our office, and made available on our website.

QUESTIONS OR COMPLAINTS

If you have questions about this Notice, wish to exercise your privacy rights, or believe your privacy rights have been violated, please contact:

Privacy Officer
Kristine M. Wanmer, PT, CEO
Clifton Park Physical Therapy
4 Emma Lane, Suite 401
Clifton Park, NY 12065
Phone: (518) 383-2610
Email: kristy@cliftonparkpt.com

You may also file a complaint with the **U.S. Department of Health and Human Services, Office for Civil Rights** by writing to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting the HHS Office for Civil Rights complaint website at www.hhs.gov/hipaa/filing-a-complaint.

Clifton Park Physical Therapy will not retaliate against you for filing a complaint.

EFFECTIVE DATE

August 10, 2026