

NOTICE OF PRIVACY PRACTICES

Evolve Recreation Therapy, LLC

Effective Date: 01/01/2026

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.

Compliance with the Health Insurance Portability and Accountability Act (“HIPAA”) and applicable privacy law

In compliance with HIPAA and applicable privacy law, Evolve Recreation Therapy, LLC (“**EVOLVE**”) is required to:

- Maintain the privacy of your protected health information (PHI)
 - Provide you with this Notice of Privacy Practices
 - Follow the terms of this Notice
 - Notify you if a breach of your unsecured health information occurs
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Uses and Disclosures of Health Information

For Treatment

EVOLVE may use and disclose your health information to provide, coordinate, or manage your recreational therapy services. This may include communication with physicians, case managers, insurance adjusters, and other healthcare professionals involved in your care.

For Payment

EVOLVE may use and disclose your health information to bill and receive payment for services provided. This includes communication with insurance companies, including Michigan Auto No-Fault insurers, claims adjusters, attorneys, and billing services.

For Healthcare Operations

EVOLVE may use your information for operational purposes such as quality improvement, documentation review, compliance activities, and administrative tasks necessary to run our practice.

Other Permitted Uses and Disclosures

EVOLVE may also use or disclose your health information without your authorization for the following purposes:

- As required by law
- For public health activities
- To report abuse, neglect, or domestic violence
- For health oversight activities
- For judicial or administrative proceedings
- To prevent a serious threat to health or safety
- For workers' compensation or similar programs

Uses and Disclosures Requiring Authorization

EVOLVE will not use or disclose your health information for purposes other than those described in this Notice without your written authorization. You may revoke your authorization at any time in writing, except to the extent we have already relied on it.

Your Rights Regarding Your Health Information

You have the right to:

- **Inspect and receive a copy** of your health records
 - **Request corrections** to your health information
 - **Request restrictions** on certain uses or disclosures
 - **Request confidential communications**
 - **Receive a copy of this Notice**
 - **Receive an accounting of disclosures**
 - **Be notified of a breach** of unsecured health information
 - **File a complaint** if you believe your privacy rights have been violated
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Complaints

If you believe your privacy rights have been violated, you may file a complaint with:

Privacy Officer:

Megan Groat, CTRS
Evolve Recreation Therapy, LLC
Email: Megan.Groat@evolverectherapy.com
Phone: 248-494-1715

You may also file a complaint with the U.S. Department of Health and Human Services. Filing a complaint will not affect your care or services.

Changes to This Notice

EVOLVE reserves the right to change the terms of this Notice. Any changes will apply to all health information maintained by **EVOLVE**. Updated versions will be available upon request and on **EVOLVE'S** website.

Contact Information

If you have questions about this Notice or your privacy rights, please contact:

Evolve Recreation Therapy, LLC
Email: Megan.Groat@evolverectherapy.com
Phone: 248-494-1715