



GOODWILL INDUSTRIES OF GREATER NEBRASKA, INC.

NOTICE OF PRIVACY PRACTICES - 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.

Effective Date: February 16, 2026

LEGAL DUTIES

Goodwill Industries of Greater Nebraska, Inc. is required by law to:

- Maintain the privacy and security of your protected health information (PHI)
- Provide you with this Notice of our legal duties and privacy practices
- Follow the terms of the Notice currently in effect

We reserve the right to change our privacy practices and this Notice. When we make a material change, we will update this Notice and make it available as required by law.

You have the right to receive a copy of this Notice in the format or medium of your choice.

HOW WE MAY USE AND DISCLOSE YOUR HEALTH INFORMATION

- For Treatment: we may use and disclose your PHI to provide, coordinate, or manage your health care and related services.
- For Payment: we may use and disclose your PHI to bill and receive payment for services you receive.
- For Health Care Operations: we may use and disclose your PHI for health care operations, such as quality assessment, training, auditing, and administrative activities.

Appointment Reminders and Service Information: we may contact you to remind you of appointments or provide information about services that may be of interest to you.

OTHER PERMITTED USES AND DISCLOSURES

We may disclose your PHI without your authorization when required or permitted by law, including for:

- Public health activities
- Health oversight activities
- Abuse, neglect, or domestic violence reporting
- Law enforcement purposes
- Judicial or administrative proceedings
- National security and military activities
- Workers' compensation
- Coroners, medical examiners, and funeral directors
- Compliance reviews by the U.S. Department of Health and Human Services

USES AND DISCLOSURES REQUIRING YOUR AUTHORIZATION: any use or disclosure of your PHI not described in this Notice will be made only with your written authorization. You may revoke an authorization at any time in writing, except to the extent we have already relied on it.

YOUR PRIVACY RIGHTS

All requests must be submitted in writing to the Privacy Official listed at the end of this Notice.

Right to Inspect and Obtain a Copy: you have the right to inspect and obtain a copy of PHI used to make decisions about your care, excluding psychotherapy notes.

- We will respond within 30 days (with one 30-day extension if necessary).
- You may request an electronic copy in the format you prefer if readily producible.

Right to Request an Amendment: You may request an amendment if you believe your PHI is incorrect or incomplete.

- We will respond within 60 days (with one 30-day extension if necessary).

Right to an Accounting of Disclosures: you may request a list of certain disclosures of your PHI. The list will not include disclosures made before April 14, 2003.

Right to Request Restrictions: you may request restrictions on how your PHI is used or disclosed.

- We are not required to agree, except when you pay in full for a service and request that information about that service not be disclosed to your health plan.

Right to Request Confidential Communications: you may request to receive communications in a specific way or at a specific location.

Right to Choose a Personal Representative: if you have given someone legal authority to act for you, that person may exercise your rights after we verify their authority.

SUBSTANCE USE DISORDER (SUD) RECORDS – 42 CFR PART 2

If we receive information about you from a federally assisted substance use disorder treatment program, that information is protected by 42 CFR Part 2.

- SUD records may only be used or disclosed as permitted by federal law or with your written consent
- SUD records may not be used or disclosed in legal proceedings without a court order or your consent
- Disclosures made with your consent will include the required redisclosure prohibition statement

BREACH NOTIFICATION: if a breach of unsecured PHI occurs, we will notify you without unreasonable delay and no later than 60 days after discovery, in accordance with HIPAA's Breach Notification Rule.

MARKETING AND FUNDRAISING: we do not sell your information. We do not use your PHI for marketing purposes without your written authorization and do not solicit service participants for fundraising activities.

QUESTIONS OR COMPLAINTS

If you have questions or wish to file a complaint, contact:

Privacy and Security Official\ Goodwill Industries of Greater Nebraska, Inc.\ Human Resources\ Phone: 308-384-7896\ Email: HRSpecialists@goodwillne.org

You may also file a complaint with the U.S. Department of Health and Human Services. You will not be retaliated against for filing a complaint.

ACKNOWLEDGMENT OF RECEIPT: you may be asked to sign an acknowledgment that you received this Notice. Your services will not be affected if you choose not to sign.