



NOTICE OF PRIVACY PRACTICES

(Combined Notice for HIPAA and 42 CFR Part 2 Programs)

Effective Date: 2/16/26

THIS NOTICE DESCRIBES HOW YOUR HEALTH INFORMATION MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION.

Please review it carefully.

WHO WE ARE

Region 5 Systems provides behavioral health services, including case management and supportive services. We are required to follow federal privacy laws, including the Health Insurance Portability and Accountability Act (HIPAA) and, when applicable, 42 CFR Part 2, which protects substance use disorder (SUD) records.

YOUR RIGHTS

You have the right to:

- Get a copy of your records
- Request corrections to your records
- Request confidential communications
- Ask us to limit how we use or share your information
- Get a list of certain disclosures
- File a complaint without fear of retaliation

HOW WE MAY USE AND DISCLOSE YOUR INFORMATION (HIPAA)

We may use and share your health information without your written permission for:

Treatment

- To provide, coordinate, or manage your care

Payment

- To bill and receive payment for services

Health Care Operations

- For administrative, quality improvement, and program operations

Other Uses Allowed by Law

- Public health and safety activities
- Reporting abuse or neglect
- Health oversight activities
- As required by law

SPECIAL PROTECTIONS FOR SUBSTANCE USE DISORDER INFORMATION (42 CFR Part 2)

Records related to substance use disorder (SUD) diagnosis, treatment, or referral are protected under federal law (42 CFR Part 2).

Stronger Privacy Rule:

We will NOT share your SUD information unless:

- You give written consent, OR
- The disclosure is specifically allowed by Part 2 law

Examples of permitted disclosures under Part 2 include:

- Medical emergencies
- Certain research or audit activities
- Court orders (special requirements apply)

Important:

A general consent for treatment or billing under HIPAA does NOT allow disclosure of SUD records.

REDISCLASURE NOTICE

Information disclosed from substance use disorder records is protected by federal law and generally cannot be redisclosed without your written consent unless permitted by law.

YOUR AUTHORIZATION

For uses and disclosures not described in this notice, we will ask for your written permission. You may revoke that permission at any time in writing.

OUR RESPONSIBILITIES

We are required to:

- Maintain the privacy and security of your information
 - Provide you with this Notice of Privacy Practices
 - Follow the terms of this Notice of Privacy Practices
 - Notify you if a breach occurs
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CHANGES TO THIS NOTICE

We may change this Notice of Privacy Practices and apply the changes to all information we maintain. Updated Notice of Privacy Practices will be available upon request.

QUESTIONS

If you have **questions** about your privacy rights, contact:

Kristin Nelson, HIPAA Privacy Officer
Region 5 Systems
402-441-4343 or knelson@region5systems.net

COMPLAINTS

If you believe your privacy rights have been **violated**, contact:

Kim Michael, Corporate Compliance Officer
Region 5 Systems
402-441-4343 or kmichael@region5systems.net

You may also file a complaint with the U.S. Department of Health and Human Services by visiting its website at: <https://www.hhs.gov/hipaa/filing-a-complaint/complaint-process/index.html>