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# NOTICE OF PRIVACY PRACTICES

## Healing Pines Recovery

42 CFR Part 2 • HIPAA Compliant • Effective February 16, 2026

### **⚠ FEDERAL NOTICE REQUIRED BY 42 CFR PART 2**

This notice describes how your substance use disorder (SUD) treatment information and other medical information about you may be used and disclosed, and how you can get access to this information. PLEASE REVIEW IT CAREFULLY.

This Notice applies to your substance use disorder treatment records, which are protected by both HIPAA (45 CFR Parts 160 & 164) and the federal confidentiality law for SUD records (42 CFR Part 2). Where these laws differ, the stricter law applies.

## 1. Who We Are

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Healing Pines Recovery is a federally assisted substance use disorder (SUD) treatment program subject to 42 CFR Part 2 and HIPAA. Our services include residential treatment, outpatient counseling, medication-assisted treatment, and recovery support services.

### **Contact Information:**

- Address: 5550 County Rd 124, Elizabeth, CO 80107
- Phone: (720) 575-2621
- Privacy Officer: Paul Leafstedt
- Email: paul@healingpinesrecovery.com

## 2. Your Substance Use Disorder Records — Special Federal Protections

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Because Healing Pines Recovery is a federally assisted SUD treatment program, your records are protected under both HIPAA and 42 CFR Part 2. These combined protections are stronger than those that apply to most medical records.

### **What Are SUD Records?**

SUD records include any information — written, electronic, or spoken — that would identify you as someone who has applied for or received substance use disorder assessment, diagnosis, or treatment at our program. This includes your name, address, treatment dates, diagnoses, treatment plans, progress notes, counselor notes, and discharge records.

### **SUD Counselor Notes — Extra Protection**

Notes made by your SUD counselor during counseling sessions that are kept separately from your general treatment record are given extra protection similar to HIPAA psychotherapy notes. These notes **cannot** be used or disclosed based on a general treatment, payment, or operations consent. You must provide specific written consent to release these notes.

## 3. Your SUD Records and Legal Proceedings

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⊖ **IMPORTANT PROTECTION:** Your substance use disorder treatment records obtained from this program — and any testimony describing the content of those records — **CANNOT** be used or disclosed in any civil, criminal, administrative, or legislative proceeding against you unless:

- You provide specific written consent authorizing the use or disclosure; OR
- A court issues a specific order under Part 2, following proper notice and a hearing — a standard subpoena alone is not sufficient.

This protection applies to all civil, criminal, administrative, or legislative proceedings, including investigations by law enforcement, child protective services, licensing boards, and employers. This standard is **stricter than standard HIPAA rules** and is designed to encourage individuals to seek treatment without fear that their records will be used against them.

## 4. How We May Use and Disclose Your Information

### With Your Written Consent — Treatment, Payment & Operations (TPO)

Under the 2024 Part 2 updates, you may sign a single written consent that covers all future uses and disclosures of your SUD records for treatment, payment, and health care operations. This is a significant change from prior law, which required separate consent for each disclosure. Each disclosure made under your consent will include a copy of your consent or a clear explanation of its scope.

Examples of TPO uses and disclosures include:

- Treatment: Sharing your records with physicians, counselors, specialists, hospitals, or pharmacies involved in your care
- Payment: Billing your insurance, Medicaid, Medicare, or other payers for services rendered
- Operations: Quality assurance, accreditation reviews, staff training, and program evaluation activities

### Without Your Consent — Permitted Disclosures Under Part 2 and HIPAA

We may use or disclose your information without your consent only in limited circumstances:

- Medical Emergencies: To medical personnel treating a life-threatening emergency (we will attempt to get your consent if possible and will report the disclosure to you afterward)
- Research: To researchers who have obtained proper Institutional Review Board or Privacy Board approval under HIPAA and Part 2 requirements
- Audit and Oversight: To government agencies authorized to audit or evaluate our program (these records cannot then be used against you without proper consent or court order)
- Reporting Crimes on Program Premises: If you commit or threaten to commit a crime on our premises or against our staff, we may report this to law enforcement — but we cannot disclose your treatment records as part of that report
- Mandated Reporting: Colorado state law requires us to report suspected child abuse or neglect to the appropriate authorities
- Qualified Service Organizations: To contractors who perform services on our behalf (such as billing services or IT providers) under a written agreement that requires them to protect your information and comply with Part 2

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- Court Orders: When a court issues an order meeting all Part 2 requirements (not just a standard subpoena), following notice to you and a proper hearing
  - State Prescription Drug Monitoring Program (PDMP): If required by Colorado law, we may report SUD medications prescribed or dispensed to the PDMP

### **Redisclosure Notice — Required by Law**

When we disclose your information, we are required by law to include the following notice with the disclosure: **“This record contains confidential substance use disorder treatment information protected by Federal law (42 CFR Part 2). Federal rules prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR Part 2. A general authorization for the release of medical or other information is NOT sufficient for this purpose. Federal rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient.”**

Additionally, once your information is disclosed to another party pursuant to HIPAA, it may be subject to redisclosure by that recipient and may no longer be protected by HIPAA.

## **5. Your Rights Regarding Your Health Information**

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You have the following rights with respect to your SUD treatment records. To exercise any of these rights, submit a written request to our Privacy Officer, Paul Leafstedt, at [paul@healingpinesrecovery.com](mailto:paul@healingpinesrecovery.com) or call (720) 575-2621.

### **Right to Access Your Records**

You have the right to inspect and obtain a copy of your health information that we maintain in a designated record set. We will respond to your request within 30 days. We may charge a reasonable, cost-based fee for copies.

### **Right to Amend Your Records**

You have the right to request that we amend your health information if you believe it is incorrect or incomplete. We may deny your request in limited circumstances (for example, if we did not create the record). If we deny your request, we will explain why in writing.

### **Right to an Accounting of Disclosures**

You have the right to request a list of certain disclosures we have made of your health information. This list does not include disclosures made for treatment, payment, operations, or pursuant to your written consent.

### **Right to Request Restrictions**

You have the right to request restrictions on how we use or disclose your information. We are not always required to agree to a restriction, but we will consider all requests in good faith.

### **Right to Confidential Communications**



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You have the right to request that we communicate with you about your health information in a certain way or at a certain location (for example, contacting you only at a specific phone number or address).

### **Right to Opt Out of Fundraising**

If Healing Pines Recovery uses your information for fundraising purposes, you have the right to opt out of receiving fundraising communications. Each fundraising communication will include a clear and conspicuous way to opt out. Once you opt out, we will not contact you for fundraising again unless you later request to be added back.

### **Right to Revoke Consent**

You may revoke your consent to use or disclose your SUD records at any time, except to the extent that we have already acted in reliance on it. To revoke your consent, submit a written revocation to our Privacy Officer. Consent for disclosure in legal proceedings must be revoked separately from other consents.

### **Right to a Paper Copy of This Notice**

You have the right to obtain a paper copy of this Notice at any time, even if you received it electronically. Ask our front desk or contact our Privacy Officer and we will provide one at no charge.

## **6. Our Legal Duties**

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Healing Pines Recovery is required by law to:

- Maintain the privacy of your health information as required by HIPAA and 42 CFR Part 2
- Provide you with this Notice of our legal duties and privacy practices
- Follow the terms of this Notice while it is in effect
- Notify you if a breach of your unsecured health information occurs as required by the HIPAA Breach Notification Rule (42 CFR Part 2 now applies the same breach notification standards)
- Post this Notice in a clear and prominent location at our facility and on our website

## **7. Changes to This Notice**

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We reserve the right to change this Notice at any time. Any revised Notice will be effective for health information we already have about you as well as any information we receive in the future. We will post the current Notice in our facility and on our website, and you may request a current copy from Paul Leafstedt, Privacy Officer, at any time.

## **8. Complaints and Questions**

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If you believe your privacy rights have been violated, or if you have questions about this Notice, you may contact our Privacy Officer or file a complaint with the U.S. Department of Health and Human Services. You will **NOT** be retaliated against for filing a complaint.



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- **Paul Leafstedt, Privacy Officer — Healing Pines Recovery** 5550 County Rd 124, Elizabeth, CO 80107 | (720) 575-2621 | paul@healingpinesrecovery.com
  - **Office for Civil Rights, U.S. Dept. of Health and Human Services**
    - Website: [www.hhs.gov/ocr/privacy/hipaa/complaints](http://www.hhs.gov/ocr/privacy/hipaa/complaints)
    - Phone: 1-800-368-1019 / TDD: 1-800-537-7697
    - Mail: 200 Independence Avenue SW, Room 509F, Washington, D.C. 20201

## 9. Effective Date

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This Notice is effective February 16, 2026 and supersedes all prior versions. It complies with 42 CFR Part 2 (as amended February 16, 2024), the HIPAA Privacy Rule (45 CFR Parts 160 & 164) as updated by the April 2024 Final Rule, and applicable Colorado state law.

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**Questions about this Notice? Contact Privacy Officer Paul Leafstedt at [paul@healingpinesrecovery.com](mailto:paul@healingpinesrecovery.com) or (720) 575-2621.**

A copy of this Notice is available at our facility, upon request, and at our website. Your acknowledgment of receipt will be captured electronically through our EHR system.