Gracia Plena Counseling & Wellness, LLC

NOTICE OF PRIVACY PRACTICES

Effective Date: August 27, 2026
415 N Kansas Ave, Hastings, NE 68901

Your Information. Your Rights. Our Responsibilities.

This notice describes how health information about you may be used and disclosed, how you can get access to this information, and the privacy practices of Gracia Plena Counseling & Wellness, LLC. Please review it carefully.

Your Rights

- Get an electronic or paper copy of your health record.
- Ask us to correct health information you believe is incorrect or incomplete.
- Request confidential communications and ask us to contact you in a specific way or at a different address.
- Ask us to limit certain uses or disclosures of your information.
- Request an accounting of certain disclosures of your health information.
- Get a paper copy of this notice at any time.
- Choose someone with legal authority to act for you.
- File a complaint if you believe your privacy rights have been violated.

How to Exercise Your Rights

You may contact Gracia Plena Counseling & Wellness, LLC to request access, correction, confidential communications, restrictions, an accounting of disclosures, or a copy of this notice. We will respond as required by applicable law. We may charge a reasonable, cost-based fee where permitted.

Your Choices

For certain health information, you may tell us your choices about what we share. If you have a clear preference about how we share information with family, friends, or others involved in your care, tell us. In situations involving marketing, sale of health information, or other uses requiring authorization, we will obtain your written authorization when required by law.

Mental Health Information

Mental health information may receive additional protections under federal or Nebraska law. We will follow applicable laws that provide greater privacy protections. Psychotherapy notes, when maintained as defined by HIPAA, generally require your written authorization for use or disclosure except as otherwise permitted by law.

How We May Use and Share Your Health Information

Treatment. We may use and share your health information with professionals involved in your care when permitted by law.

Practice operations. We may use and share information to operate the practice, improve services, manage care, and contact you when necessary.

Payment. We may use and share information to bill and obtain payment from you, health plans, or other responsible parties.

Other uses and disclosures permitted or required by law. We may use or disclose information for purposes such as public health and safety activities, health oversight, certain judicial or administrative proceedings, workers' compensation, law enforcement or government requests, research when legally permitted, and other situations required or allowed by law. We will meet the conditions that apply before making these disclosures.

Substance Use Disorder Records

To the extent Gracia Plena Counseling & Wellness, LLC creates or maintains substance use disorder patient records that are protected by 42 CFR Part 2, those records receive additional confidentiality protections. Such records will not be used or disclosed for investigations or legal proceedings against you unless permitted by applicable law, including when supported by your written consent or an appropriate court order and subpoena as required.

Our Responsibilities

- We are required by law to maintain the privacy and security of 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.
- We will not use or share your information other than as described in this notice unless you authorize us in writing or the law permits or requires it. You may revoke an authorization in writing, subject to applicable limitations.

Changes to This Notice

We may change the terms of this notice, and the changes may apply to all information we maintain about you. The current notice will be available upon request, at our office, and on our website.

Complaints

If you believe your privacy rights have been violated, you may contact Gracia Plena Counseling & Wellness, LLC. 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.

Privacy Contact

Gracia Plena Counseling & Wellness, LLC
Attn: Privacy Officer
415 N Kansas Ave
Hastings, NE 68901

Email:
_office@graciaplenacounseling.com_____
Phone:____4027808842_____

Important: Complete the Privacy Contact email and phone number before posting or distributing this notice. This document is based on the February 2026 HHS model Notice of Privacy Practices for HIPAA covered health care providers. Because state law and the practice's specific services may impose additional requirements, consider having the final notice reviewed by your compliance professional, attorney, or malpractice/risk-management resource.