Dragonfly ABA LLC

NOTICE OF PRIVACY PRACTICES

Your Information. Your Rights. Our Responsibilities.

PLEASE REVIEW THIS NOTICE CAREFULLY

This Notice explains how health information about you or your child may be used or disclosed, how you can obtain access to that information, and the responsibilities of Dragonfly ABA LLC.

Effective date: August 19, 2026

This Notice applies to Dragonfly ABA LLC and its employees, contractors, trainees, and other workforce members who are permitted to handle protected health information on its behalf.

Privacy contact

Privacy Officer	Carol Rodrigues
Mail	10449 E Jacob, Mesa, AZ 85209
Telephone	(602) 726-4056
Email	carol@dragonflyaba.org

Your rights

You have the rights described below. Contact the Privacy Officer if you want to exercise any of these rights or need help making a request.

Receive a copy of your records

- You may ask to inspect or receive an electronic or paper copy of the medical, treatment, and billing records maintained about you or your child.
- We will ordinarily respond within 30 calendar days. If additional time is legally permitted, we will notify you in writing.
- Any fee will be reasonable and limited to legally permitted, cost-based expenses.

Request a correction

- You may ask us to amend information that you believe is incorrect or incomplete.
- We may deny the request in circumstances allowed by law, but we will explain the decision in writing, generally within 60 days.

Request confidential communications

- You may ask us to contact you in a particular way or at a different address. We will accommodate reasonable requests.

Request limits on use or disclosure

- You may ask us to limit how we use or share information for treatment, payment, or health care operations. We are not always required to agree, but we will follow any restriction we accept except when information is needed for emergency treatment.
- If you pay in full out of pocket for a service, you may ask us not to disclose information about that service to your health plan for payment or operations. We will honor the request unless disclosure is required by law.

Receive an accounting of certain disclosures

- You may ask for a list of certain disclosures made during the six years before your request, including who received the information and the purpose of the disclosure.
- The list will not include certain disclosures excluded by law, such as many disclosures for treatment, payment, operations, or disclosures you authorized. One accounting in a 12-month period is free; an additional request may involve a reasonable, cost-based fee.

Receive this Notice

- You may request a paper copy at any time, even if you previously agreed to receive it electronically.

Choose a representative

- A parent, guardian, health care decision maker, medical power of attorney, or other legally authorized representative may exercise rights for the individual. We will verify the person's identity and authority before acting.

File a complaint

- You may contact Carol Rodrigues, Privacy Officer, using the information above if you believe your privacy rights were violated.
- You may also complain to the U.S. Department of Health and Human Services, Office for Civil Rights, by visiting https://www.hhs.gov/hipaa/filing-a-complaint, calling 1-877-696-6775, or writing to 200 Independence Avenue, S.W., Washington, D.C. 20 201.
- Dragonfly ABA will not retaliate against you for making a complaint.

Your choices

In certain situations, you may tell us what you want us to do with your information. We will follow your instructions when the law gives you that choice.

- You may tell us whether to share relevant information with family members, close friends, caregivers, or others involved in care or payment.
- You may tell us whether to share information with a disaster-relief organization.
- If you cannot express a preference, we may disclose relevant information when professional judgment indicates it is in your best interest or when necessary to reduce a serious and imminent threat to health or safety.

Uses requiring written authorization

Unless another law specifically permits the disclosure, we will obtain your written authorization before:

- Using identifiable patient information for marketing, testimonials, photographs, videos, or social-media content;
- Selling protected health information; or

- Using or disclosing psychotherapy notes, if Dragonfly ABA ever maintains such notes, except as otherwise permitted by law.

Dragonfly ABA does not maintain a hospital directory, does not sell protected health information, and does not currently use patient information for fundraising.

You may revoke an authorization in writing at any time. The revocation will not affect actions already taken in reliance on the authorization.

How we typically use or share information

Treatment

We may use health information to provide ABA assessment, treatment, supervision, caregiver training, care coordination, and related services. We may share relevant information with other professionals involved in care, such as physicians, schools, therapists, or other providers, when permitted by law.

Health care operations

We may use or share information to operate the practice, supervise and train staff, assess quality, coordinate services, manage cases, conduct compliance activities, and improve care.

Payment

We may use or disclose information to verify benefits, obtain authorization, submit claims, collect payment, respond to payer reviews, and perform other billing activities.

Appointment and service communications

We may use contact information to schedule or confirm services, communicate about treatment, provide service updates, and discuss health-related services that may be relevant to care.

Other uses and disclosures allowed or required by law

The law may allow or require us to use or share information for the purposes below. We will satisfy the applicable legal conditions before doing so and will limit the information when required.

- Public-health and safety activities, including disease prevention, product recalls, reporting certain adverse events, and preventing or reducing a serious threat.
- Reports of suspected abuse, neglect, or domestic violence when reporting is permitted or required.
- Health oversight activities, audits, inspections, licensing matters, and investigations authorized by law.
- Research that has received the approvals, authorizations, or waivers required by law.
- Workers' compensation and similar benefit programs.
- Law-enforcement or other government requests that meet applicable legal requirements.
- Court or administrative proceedings, court orders, subpoenas, or other lawful process, subject to HIPAA and Arizona requirements.
- Coroners, medical examiners, funeral directors, and organ-procurement organizations when applicable.
- Compliance with federal or state law and disclosures to HHS for HIPAA compliance review or enforcement.

Specially protected information

Arizona confidentiality protections

Arizona law treats medical and payment records, and certain behavioral health records, as confidential. Dragonfly ABA will disclose those records only as authorized by applicable state or federal law or by a valid authorization from the patient or legally authorized decision maker.

Substance use disorder records

If Dragonfly ABA receives or maintains substance use disorder patient records protected by 42 CFR Part 2, we will not use or disclose information from those records in a civil, criminal, administrative, or legislative investigation or proceeding against the patient unless the patient provides written consent or the disclosure is authorized by both an appropriate court order and subpoena. Other Part 2 protections will also apply.

Minors and personal representatives

A parent or guardian generally acts as a minor child's personal representative. Exceptions may apply when state or federal law allows the minor to consent to care, a court or other authorized person directs care, or the law otherwise limits the representative's access. We will apply the law and professional judgment to the particular circumstances.

Our responsibilities

- We are legally required to protect the privacy and security of protected health information.
- We must follow the practices described in the Notice currently in effect and provide you with a copy.
- We will notify affected individuals as required if a breach may have compromised protected health information.
- We will not use or disclose information in a way not described in this Notice unless you authorize it in writing or the law permits or requires it.
- We will apply reasonable administrative, physical, and technical safeguards to protect information.

Changes to this Notice

Dragonfly ABA may change this Notice and apply the revised terms to information already maintained as well as information received in the future. The current Notice will be available upon request and posted on the Dragonfly ABA website. A revised Notice will display a new effective date.

Questions, requests, or complaints

Contact Carol Rodrigues, Privacy Officer, at (602) 726-4056, carol@dragonflyaba.org, or 10 449 E Jacob, Mesa, AZ 85 209.

This Notice is based on the February 2026 HHS Model Notice of Privacy Practices for HIPAA Covered Health Care Providers and is customized for Dragonfly ABA LLC. It should be reviewed when services, systems, laws, or privacy practices materially change.