

QADIR HEALTH

NOTICE OF PRIVACY PRACTICES

HIPAA and Substance Use Disorder Record Protections

THIS NOTICE EXPLAINS HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED, HOW YOU CAN ACCESS IT, AND HOW TO FILE A PRIVACY COMPLAINT. PLEASE REVIEW IT CAREFULLY.

Legal entity	Aftab A. Qadir, MD Inc. dba Qadir Health
Effective date	September 2, 2026
Privacy Officer	Aftab A. Qadir, MD
Address	9481 Pittsburgh Ave, Suite 100, Rancho Cucamonga, CA 91730
Contact	Call 909-970-5700 Secure text 818-654-4537 Info@qadirhealth.com

At a glance

Your rights	Your choices	Our typical uses
• Inspect or obtain a copy of your record • Request a correction • Request confidential communications • Request limits on certain uses or disclosures • Receive an accounting of certain disclosures • Complain without retaliation	• Family, friends, and others involved in care • Disaster-relief communications • Marketing, sale of information, and most psychotherapy notes • Fundraising communications	• Treat you and coordinate care • Operate and improve the practice • Bill and obtain payment • Meet legal, public-health, safety, oversight, and other permitted obligations

This notice applies to Qadir Health, its clinicians, workforce members, and others who help provide or support care and are permitted by law to use protected health information on its behalf. It applies to information maintained in paper, electronic, oral, and other forms.

Your rights

You may exercise these rights by contacting the Privacy Officer. We may ask you to submit a written request and verify your identity or authority.

Get an electronic or paper copy of your record

You may inspect or obtain a copy of medical and billing records and other health information we maintain about you. We ordinarily respond within 30 days. If we cannot meet that deadline, we will explain the reason and any extension permitted by law. We may charge only a reasonable, cost-based fee allowed by law.

Ask us to correct your record

You may ask us to amend information you believe is incorrect or incomplete. We may deny the request in circumstances allowed by law, but we will provide a written explanation, ordinarily within 60 days, and explain how you may submit a statement of disagreement.

Request confidential communications

You may ask us to contact you in a particular way or at a different address. We will accommodate reasonable requests. Tell us if communicating by voicemail, text, email, mail, or another method creates a privacy concern.

Ask us to limit what we use or share

You may request restrictions on uses or disclosures for treatment, payment, or health care operations. We are not generally required to agree. If we agree, we will honor the restriction except as needed for emergency treatment or as otherwise permitted by law.

Limit disclosure to a health plan after full self-payment

If you pay in full out of pocket for an item or service, you may ask us not to disclose information about that item or service to your health plan for payment or health care operations. We will honor the request unless disclosure is required by law.

Receive an accounting of certain disclosures

You may request a list of certain disclosures made during the six years before your request. The accounting does not include disclosures for treatment, payment, or health care operations and certain other disclosures excluded by law. One accounting in a 12-month period is free; a reasonable cost-based fee may apply to additional requests.

Receive a copy of this notice

You may obtain a paper copy at any time, even if you agreed to receive it electronically. The current notice is also available on qadirhealth.com.

Choose someone to act for you

A personal representative with legal authority, such as an agent under a valid health-care power of attorney or a legal guardian, may exercise your rights. We will verify that authority before acting.

Your choices

For the situations below, tell us your preference. We will follow your instructions when the law gives you the right to decide.

People involved in your care

You may tell us whether to share relevant information with family members, close friends, caregivers, or others involved in your care or payment for your care. If you cannot tell us your preference, we may share limited information when we reasonably believe it is in your best interest, or when needed to lessen a serious and imminent threat to health or safety.

Disaster relief

You may tell us whether to share limited information with an organization assisting in disaster-relief efforts.

Written authorization is ordinarily required

Unless another law specifically permits it, we will obtain your written authorization before using or disclosing your information for:

- Marketing purposes;
- The sale of protected health information;
- Most uses or disclosures of psychotherapy notes; and
- Any other purpose not described in this notice or otherwise allowed by law.

You may revoke an authorization in writing at any time, except to the extent we have already relied on it. We do not sell your protected health information.

Fundraising

If Qadir Health ever contacts you for fundraising, you may opt out of future fundraising communications. If the communication would use records protected by 42 CFR Part 2, we will provide advance notice and a choice as required by law.

How we typically use and share information

Treatment

We may use your information and share it with professionals involved in your care. For example, we may send relevant information to another treating clinician, a pharmacy, a laboratory, or a hospital to coordinate treatment, check medication safety, or arrange follow-up care.

Health care operations

We may use and share information to operate the practice, improve quality, train staff, conduct compliance activities, manage care, evaluate performance, communicate about appointments, and contact you when necessary.

Payment

We may use and share information to bill you, submit claims, obtain prior authorization, confirm coverage, collect payment, and respond to questions from health plans or other payers.

Important: if information is protected by 42 CFR Part 2, the additional restrictions described later in this notice apply and may require your consent even when HIPAA would otherwise permit the use or disclosure.

Other uses and disclosures permitted or required by law

HIPAA permits or requires other uses and disclosures for public-interest and legal purposes. We must satisfy the applicable conditions before sharing information and will limit disclosures to what the law permits.

Public health and safety

- Preventing or controlling disease and supporting authorized public-health activities
- Reporting adverse events, medication reactions, or product problems and helping with recalls
- Reporting suspected abuse, neglect, or domestic violence when authorized or required
- Preventing or reducing a serious and imminent threat to health or safety

Research

- Using or sharing information for approved research when legal protections are in place, such as your authorization, an institutional review board or privacy board waiver, or another permitted pathway

Compliance with law and oversight

- Making disclosures required by federal, California, or other applicable law
- Responding to authorized health-oversight activities such as audits, investigations, inspections, licensure, or disciplinary proceedings
- Providing information to the U.S. Department of Health and Human Services to demonstrate compliance with federal privacy law

Specialized government functions

- Authorized military, national-security, intelligence, correctional-institution, or protective-service activities

Workers' compensation

- Using or sharing information as authorized by laws governing workers' compensation or similar programs

Organ donation and death

- Responding to organ and tissue donation requests
- Working with a coroner, medical examiner, or funeral director as permitted by law

Legal proceedings and law enforcement

- Responding to a valid court or administrative order, subpoena, discovery request, or other lawful process, after satisfying applicable privacy protections
- Responding to law-enforcement requests when and only to the extent permitted or required by law

Substance use disorder records protected by 42 CFR Part 2 generally may not be used or disclosed in civil, criminal, administrative, or legislative investigations or proceedings against you unless you give written consent or a Part 2-compliant court order and subpoena (or similar legal mandate) authorizes it.

Additional protections for substance use disorder records

Qadir Health provides addiction-medicine services. Some records that identify a person as having or having had a substance use disorder may be protected by 42 U.S.C. 290dd-2 and 42 CFR Part 2 in addition to HIPAA. When Part 2 applies, we follow the more protective rule.

Consent for most uses and disclosures

When required by Part 2, we will obtain your written consent before using or disclosing your Part 2 records. A valid consent may authorize future uses and disclosures for treatment, payment, and health care operations. You may ask for a more limited consent, although a limitation may affect the services we can provide or how services are paid. You may revoke consent as allowed by law.

Redisclosure after a general consent

When you give a general consent for treatment, payment, and health care operations, a HIPAA-regulated recipient may redisclose the information as HIPAA permits. Part 2 still prohibits using or disclosing the information in investigations or legal proceedings against you without your written consent or a Part 2-compliant court order and subpoena.

Uses and disclosures without consent

Part 2 permits limited uses and disclosures without consent only when its specific conditions are satisfied. Depending on the circumstances, these may include:

- Communications within the program and with qualified service organizations or contractors assisting the program;
- A bona fide medical emergency;
- Certain public-health disclosures of de-identified information;
- Scientific research that meets Part 2 requirements;
- Authorized audits and evaluations;
- Reporting suspected child abuse or neglect as required by law;
- Reporting a crime or threat of a crime on program premises or against program personnel;
- Limited cause-of-death inquiries; and
- A disclosure specifically authorized by a Part 2 court order.

Your additional Part 2 rights

- Ask us to limit uses or disclosures after providing consent, subject to the limits explained in this notice;
- Receive advance notice and a choice before fundraising communications use Part 2 information;
- Request an accounting of certain disclosures of electronic Part 2 records, when applicable;
- Request a list of certain health-care providers that received your records through an intermediary, when applicable; and
- Ask questions and file a complaint without retaliation.

Consent to disclose Part 2 records for treatment, payment, or operations is separate from acknowledging receipt of this notice. Signing an acknowledgment does not itself authorize disclosure.

Our responsibilities

- We are required by law to maintain the privacy and security of your protected health information.
- We will notify you promptly if a breach occurs that may have compromised the privacy or security of your information, as required by law.
- We must follow the duties and privacy practices described in the notice currently in effect and make a copy available to you.
- We will not use or share information for purposes not described here unless you authorize us in writing or the law otherwise permits or requires it.
- We will not retaliate against you for exercising a privacy right or filing a complaint.

California privacy protections

California law may provide additional confidentiality protections for certain categories of information, including substance use disorder, mental-health, HIV/AIDS-related, genetic, reproductive-health, and sexual-health information. When California or another applicable law is more protective than HIPAA, Qadir Health will follow the more protective requirement and obtain a specific written authorization when required.

Changes to this notice

We may change this notice and make the revised terms effective for information we already maintain as well as information we receive in the future. If we make a material change, the revised notice will be available on request, in our office, and on qadirhealth.com. The effective date appears on the first page.

Questions, requests, or complaints

Contact the Qadir Health Privacy Officer to exercise a right, request a copy, ask a question, or make a complaint:

Privacy Officer	Aftab A. Qadir, MD
Practice	Aftab A. Qadir, MD Inc. dba Qadir Health
Address	9481 Pittsburgh Ave, Suite 100, Rancho Cucamonga, CA 91730
Phone	909-970-5700
Secure text	818-654-4537
Email	Info@qadirhealth.com

You may also file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights:

200 Independence Avenue, S.W., Washington, D.C. 20201 | 1-877-696-6775 | hhs.gov/hipaa/filing-a-complaint

For records protected by 42 CFR Part 2, you may also submit a complaint to the Secretary of the U.S. Department of Health and Human Services as provided by federal law. Qadir Health will not retaliate against you for filing any privacy complaint.

You have the right to a paper or electronic copy of this notice and to discuss it with the Qadir Health Privacy Officer using the contact information above.