Blue Angels Home Care, LLC
9788 Gilespie St Ste D-400, Las Vegas, NV 89183
Ph: 725-502-0901 | Fax: 702-718-0342 | info@blueangelshc.com

Notice of Privacy Practices

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Effective date: December 1, 2026

Blue Angels Home Care, LLC ("we", "us") provides non-medical personal care in the home. To care for you, we keep information about you, such as your name, address, phone, date of birth, Medicaid or insurance number, care needs, service plan, visit records and payment information. This is your "protected health information." The law requires us to keep it private, to give you this notice of our legal duties and privacy practices, to follow the notice that is in effect, and to tell you if your information is affected by a breach.

How we use and share your information

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

- **Your care:** to plan and provide your services, for example sharing your service plan with your caregivers, and talking with your doctor, nurse, case manager or other agencies involved in your care.
- **Payment:** to bill and be paid by you, Nevada Medicaid, your insurance (including long-term care insurance) or another payer, including visit verification (EVV) records and prior authorizations.
- **Running our agency:** for scheduling, supervision, training, quality checks, audits, licensing and legal advice. We share with vendors that help us (for example scheduling and e-signature services) only under a written agreement that requires them to protect it.
- **Family and friends:** we may share information with a family member, friend or other person involved in your care or in paying for it, if you agree or don't object. If you can't agree (for example in an emergency), we use our best judgment about what is in your interest. You can tell us who not to talk to.
- **Your personal representative:** someone with legal authority to act for you, such as a guardian or a health care power of attorney, may use your rights in this notice.

We may also share your information when the law allows or requires it:

- **Required by law:** when federal, state or local law requires it.
- **Abuse, neglect or exploitation:** to report suspected abuse, neglect, exploitation or isolation of an older or vulnerable person to the proper authorities.
- **Health and safety:** to prevent or lessen a serious threat to you or others, and for public health activities such as reporting certain diseases.
- **Oversight:** to the Nevada licensing authority, Medicaid and other government agencies for inspections, audits and investigations.
- **Courts and law enforcement:** in response to a court order, subpoena or other lawful process, or to law enforcement as the law allows.
- **Workers' compensation, coroners and government functions:** as the law allows for workers' compensation claims, coroners and medical examiners, and special government functions such as military or national security.

When we need your written permission

We will not use or share your information for marketing, and we will not sell it, without your written permission. For example, we ask you to sign a Review & Testimonial Permission form before we use your review, photo or story on our website, social media or printed materials. For any other use not described in this notice, we will ask for

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your written permission. You may take back your permission at any time in writing, except for what we already did relying on it. We do not use your information for fundraising.

Nevada law gives extra protection to some information, such as HIV status, sexual orientation and gender identity. When Nevada law is stricter than federal law, we follow Nevada law.

Your rights

- **See and get a copy of your records:** ask us, in writing or by phone. We will respond within 30 days and give you a paper or electronic copy. We may charge a reasonable, cost-based fee for copies.
- **Ask us to correct your records:** if you think information is wrong or incomplete. We will respond within 60 days, and if we say no, we will tell you why in writing and how you can disagree.
- **Ask for confidential communications:** for example, to call you at a different number or mail to a different address. We will agree to reasonable requests.
- **Ask us to limit what we use or share:** we are not required to agree, except that if you pay for a service in full yourself, you can ask us not to share it with your health plan, and we will agree unless the law requires us to share it.
- **Get a list of who we shared your information with:** for up to 6 years before your request, not including sharing for your care, payment, our operations, or what you gave permission for. One list a year is free.
- **Get a copy of this notice:** at any time, on paper or by email, even if you agreed to get it electronically. It is also on our website.
- **Choose someone to act for you:** a guardian or health care power of attorney can use these rights for you. We will confirm their authority first.
- **Be told about a breach:** we will tell you if your unsecured information is affected by a breach.

Questions or complaints

If you have questions, want to use any of these rights, or believe your privacy rights were violated, contact our Privacy Officer: Kaye Bonilla, Blue Angels Home Care, LLC, 9788 Gilespie St Ste D-400, Las Vegas, NV 89183; 725-502-0901; info@blueangelshc.com.

You may also file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, 200 Independence Avenue SW, Washington, DC 20201; 1-877-696-6775; www.hhs.gov/ocr/privacy/hipaa/complaints/.

We will not retaliate against you for filing a complaint, and your care will not be affected.

Changes to this notice

We may change this notice, and the changes will apply to all information we have about you. The new notice will be available on request, at our office and on our website, www.blueangelshc.com.