

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE:

A cloud-based HIPPA compliant electronic health records is used and medical scribe platforms may be used during the session. We use industry best practice steps to ensure data security.

USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS

INFORMATION. According to HIPAA, I am required to give you this Notice about our privacy practices, your rights and our legal responsibilities.

Our Uses and Disclosures We may use and share your information as we:

- Help manage the health care treatment you receive
- Run our organization
- Pay for your health services
- Comply with the law
- Address workers' compensation, law enforcement, and other government requests
- Respond to lawsuits and legal actions

Your Rights

When it comes to your health information, you have certain rights. This section explains your rights and some of our responsibilities to help you.

Get a copy of health and claims records

- You can ask to see or get a copy of your health and claims records and other health information we have about you. Ask us how to do this.
- We will provide a copy or a summary of your health and claims records, usually within 30 days of your request. We may charge a reasonable, cost-based fee.

Ask us to correct health and claims records

- You can ask us to correct your health and claims records if you think they are incorrect or incomplete. Ask us how to do this.
- We may say "no" to your request, but we'll tell you why in writing within 60 days.

Request confidential communications

- You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address.
- We will consider all reasonable requests, and must say "yes" if you tell us you would be in danger if we do not.

Ask us to limit what we use or share

- You can ask us not to use or share certain health information for treatment, payment, or our operations.
- We are not required to agree to your request, and we may say “no” if it would affect your care.

Get a list of those with whom we’ve shared information

- You can ask for a list (accounting) of the times we’ve shared your health information for six years prior to the date you ask, who we shared it with, and why.
- We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We’ll provide one accounting a year for free but will charge a reasonable, cost-based fee if you ask for another one within 12 months.

Get a copy of this privacy notice

You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.

Choose someone to act for you

- If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information.
- We will make sure the person has this authority and can act for you before we take any action.

File a complaint if you feel your rights are violated

- You can complain if you feel we have violated your rights by contacting us using the information on page 1.
- You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting www.hhs.gov/ocr/privacy/hipaa/complaints/.
- We will not retaliate against you for filing a complaint.

Part 2: Understanding Confidentiality of Substance Use Disorder (SUD) Patient Records

There are now limitations on when substance use disorder patient records can be shared - In general, There are now more protections for sharing any information that would identify someone as having, or having had, a substance use disorder with limited exceptions, such as for emergency medical treatment, records may only be shared if the patient gives written consent or there is a court order and subpoena (or similar legal mandate).

- **Single consent and redisclosure** - Patients can provide a single consent for all future uses and disclosures of Part 2 records for treatment, payment, and health care operations. This is called a “TPO consent.” When an entity that is subject to HIPAA, such as a covered health care provider or a patient’s health plan, receives a Part 2 record with the TPO consent, that entity can share the record again without consent in all the ways that HIPAA allows, except for using the information in legal proceedings against the patient.
- **Prohibitions on the use of SUD patient records against a patient** - Part 2 prohibits SUD patient records from being used or disclosed in legal proceedings against patients without their consent or a court order and subpoena (or a similar legal mandate). It also establishes requirements for court orders that permit use and disclosure under limited circumstances.

Our Responsibilities

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly 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 this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

For more information see:

www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html.