



Mara Watts
Counseling and Consulting

HIPAA COMPLIANCE PRIVACY NOTICE
YOUR INFORMATION, YOUR RIGHTS, OUR RESPONSIBILITIES

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.

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Your Rights

You have the right to:

- Get a copy of your paper or electronic medical record.
- Correct your paper or electronic medical record.
- Request confidential communication.
- Ask us to limit the information we share.
- Get a list of those with whom we have shared your information.
- Get a copy of this Privacy Notice.
- Choose someone to act on your behalf.
- File a complaint if you believe your privacy rights have been violated.

Our Uses and Disclosures

We may use and share your information as we:

- Treat you.
- Bill for your services.

- Help with public health and safety issues.
- Comply with the law.
- Work with a medical examiner or funeral director.
 - 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 an electronic or paper copy of your medical record.

- You can ask to see or receive an electronic or paper copy of your medical record and other health information we have about you
- We will provide a copy or a summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee.

Correct your medical record.

- You can ask us to correct your health information that you think is incorrect or incomplete.
- We may deny your request, but we will 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 agree to all reasonable requests. Limit what we use or share.
 - You can ask us not to use or share certain parts of your health information for treatment, payment, or our operations.
 - We are not required to agree to your request, and we may deny it if it affects your care.
 - If you pay for a service or health care item out-of-pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer. We will agree to your request unless a law requires us to share that information.
- Receive a list of those with whom we have shared information.

- You can ask for a list ("accounting") of the times we have shared your health information for six years prior to the date you ask, with whom we shared this information, and why.

- We will include all the disclosures except those about treatment, payment, and health care operations, and certain other disclosures (such as any you requested us to make). We will provide one accounting a year for free, but will charge a reasonable, cost-based fee if you request another 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 on your behalf.

- 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 on your behalf 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.

- 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.

YOUR CHOICES

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions. In these cases, you have both the right and choice to tell us to:

- Share information with your family, close friends, or others involved in your care.
- Share information in a disaster relief situation. If you are not able to tell us your preference – for example, if you are unconscious – we may go ahead and share your information if we believe it is in your best interest.

We may also share your information when needed to lessen a serious and imminent threat to health or safety.

In the following cases, we never share your information unless you give us written permission:

- Marketing purposes.

- Sale of your information.
- Sharing of psychotherapy notes.

OUR USES AND DISCLOSURES

How do we typically use or share your health information?

To treat you.

- We can use and share your health information with other professionals who are treating you.
- We can use and share your health information to run our practice or improve your care and contact you when necessary.

To bill for services.

- We can use and share your health information to bill and get payment from health plans or other entities.

How else can we use or share your health information? We are allowed or required to share your information in other ways – usually to contribute to the public good, such as public health and research. We must meet many legal conditions before we can share your information for these purposes. For more information, visit:
www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html .

To help with public health and safety issues.

- Preventing disease.
- Helping with product recalls.
- Reporting adverse reactions to medications.
- Reporting suspected abuse, neglect, or domestic violence.
- Preventing or reducing a serious threat to anyone's health or safety
- We will share information about you if state or federal laws require it, including the Department of Health and Human Services, if it needs to confirm that we are complying with federal privacy law
- For workers' compensation claims.

- For law enforcement purposes or with a law enforcement official. To respond to lawsuits and legal actions.

- We can share health information about you in response to a court or administrative order, or in response to a subpoena.