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NOTICE OF PRIVACY PRACTICES

THIS NOTICE DESCRIBES HOW YOUR HEALTH INFORMATION MAY BE USED AND DISCLOSED AND HOW YOU CAN ACCESS THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

You may have additional rights under California law. This notice complies with the Health Insurance Portability and Accountability Act (HIPAA) and applicable California laws, including the Confidentiality of Medical Information Act (CMIA).

EFFECTIVE DATE

This notice is effective as of June 9, 2023.

MY PLEDGE REGARDING YOUR HEALTH INFORMATION

I understand that your health information is personal and I am committed to protecting it. I create a record of the care and services you receive from me to provide quality care and to comply with legal requirements. This notice applies to all records of your care created or maintained by me.

I am required by law to:

- Maintain the privacy and security of your protected health information (PHI)
- Provide you with this notice of my legal duties and privacy practices
- Follow the terms of this notice currently in effect
- Notify you promptly if a breach occurs that may compromise the privacy or security of your information

I may change the terms of this notice, and any changes will apply to all information I maintain. Updated notices will be available upon request and on my website.

HOW I MAY USE AND DISCLOSE YOUR HEALTH INFORMATION

1. Treatment, Payment, and Health Care Operations

I may use and disclose your PHI without your written authorization for purposes of treatment, payment, and health care operations. For example:

- Providing, coordinating, or managing your care
- Consulting with other healthcare providers
- Billing and collecting payment
- Appointment reminders or administrative communications

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2. Uses and Disclosures Required or Permitted by Law

I may disclose your PHI without your authorization when required or permitted by law, including:

- **Public health and safety:** Reporting suspected child abuse, elder abuse, or dependent adult abuse
- **Serious threat (Duty to Protect):** If necessary to prevent or lessen a serious and imminent threat to your health or safety or that of another person (consistent with California law, including Tarasoff obligations)
- **Health oversight:** Audits, investigations, and licensing reviews
- **Judicial/legal proceedings:** Court orders, subpoenas, or other lawful processes
- **Law enforcement:** Reporting crimes occurring on the premises
- **Coroners/medical examiners:** As required for their duties
- **Workers' compensation claims**
- **Specialized government functions** (e.g., military, national security)
- **Organ and tissue donation requests**

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3. Disclosures to Family and Others Involved in Your Care

With your permission, I may share relevant information with family members or others involved in your care or payment for care. You have the right to object to these disclosures.

USES AND DISCLOSURES REQUIRING YOUR AUTHORIZATION

1. Psychotherapy Notes

Psychotherapy notes receive special protection. I will not use or disclose these notes without your written authorization except in limited circumstances permitted by law (e.g., for treatment, supervision, legal defense, or as required by law).

2. Marketing

I will not use or disclose your PHI for marketing purposes without your written authorization. You may revoke this authorization at any time in writing.

3. Sale of PHI

I will never sell your PHI.

LIMITS OF CONFIDENTIALITY (CALIFORNIA-SPECIFIC)

While your information is generally confidential, there are important exceptions under California law:

- If I believe you pose a serious danger to yourself or others
- If there is suspected abuse or neglect of a child, elder, or dependent adult
- If records are required by a valid court order
- If disclosure is required for legal or regulatory purposes

Additionally, I may consult with other professionals to provide you with the best care. In such cases, identifying information is shared only when necessary and appropriate.

YOUR RIGHTS REGARDING YOUR PHI

You have the following rights:

1. Right to Access

You may request a copy of your medical record by submitting a written request (email or mail). I will respond within 30 days. A reasonable fee may apply.

2. Right to Amend

You may request corrections to your record. I may deny your request but will provide a written explanation within 60 days.

3. Right to an Accounting of Disclosures

You may request a list of disclosures made in the past six years (excluding treatment, payment, and operations). I will respond within 60 days.

4. Right to Request Restrictions

You may request limits on how your PHI is used or disclosed. I am not required to agree, except in cases where you pay out-of-pocket in full and request restriction from your health plan.

5. Right to Confidential Communications

You may request that I contact you in a specific way (e.g., phone, email, different address). I will accommodate reasonable requests.

6. Right to a Copy of This Notice

You may request a paper or electronic copy of this notice at any time.

7. Right to Appoint a Representative

If someone has legal authority (e.g., power of attorney), they may act on your behalf.

8. Right to Revoke Authorization

You may revoke any authorization at any time in writing.

9. Right to File a Complaint

You may file a complaint if you believe your privacy rights have been violated.

You may contact:

- **This practice:** using the contact information above
- **U.S. Department of Health and Human Services (HHS):**
  Office for Civil Rights
  200 Independence Ave SW, Washington, DC 20201
  Phone: (877) 696-6775
  Website: www.hhs.gov/ocr/privacy/hipaa/complaints

You will not be retaliated against for filing a complaint.

ELECTRONIC COMMUNICATIONS & TELEHEALTH

If you choose to communicate via email, text, or telehealth platforms, there may be some risk to confidentiality despite reasonable safeguards. By using these methods, you acknowledge and accept these risks.

CHANGES TO THIS NOTICE

I reserve the right to change this notice at any time. Updated versions will apply to all PHI I maintain and will be available upon request and on my website.