

Vibrant Minds Counseling, LLC

Elise Nunez, MA, LPC 33 Court Street, Suite 4, New Britain, CT 06051 (P) 203-519-6900 / (F) 888-980-6893 elise@vibrantmindscounseling.com

NOTICE OF PRIVACY PRACTICES

Notice of Privacy Practices Under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), this notice describes how medical information about you may be used and disclosed and how you can get access to this information.

My pledge to you:

I understand that your medical and psychological health information is personal. I am committed to protecting this information about you. I create a record of the care and services you receive to provide quality care and to comply with legal requirements. This notice applies to all records of your care generated by Elise Nunez, MA, LPC of Vibrant Minds Counseling, LLC.

I am required by law to:

- Keep medical and behavioral health information about you private;
- Give you this notice of my legal duties and privacy practices with respect to medical and behavioral health information about you; and
- Follow the terms of the notice that are currently in effect.

How information in your psychological health record may be used and disclosed:

Information in your psychological record may be used and disclosed without your prior authorization for treatment, such as sending information about you to a specialist as part of a referral (this includes psychiatric or HIV information if needed for purposes of your diagnosis and treatment); to obtain payment for treatment, such as sending billing information to your insurance company or Medicare; and to support healthcare operations, such as comparing patient data to improve treatment methods or for professional education purposes (Note: only limited psychiatric or HIV information may be disclosed for billing purposes without your authorization). If you are treated in a specialized substance abuse program, your special authorization is required for most disclosures other than emergencies. Other examples of such uses and disclosures include contacting you for appointment reminders and telling you about or recommending possible treatment options, alternatives, health-related benefits or services that may be of interest to you.

Information in your psychological record may be used or disclosed without your prior authorization for several other reasons. Subject to certain requirements, information in your psychological record may be given for public health purposes, abuse or neglect reporting, there is reason to believe you are to be of harm to yourself or others, health oversight audits or inspection, medical examiners, funeral arrangements and organ donation, workers' compensation purposes, emergencies, national security and other specialized government functions, and for members of the Armed Forces as required by Military Command authorities.

Information in your psychological record can also be disclosed when required by law, such as in response to a request from law enforcement in specific circumstances, or in response to valid judicial or administrative orders or other legal process.



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Under certain circumstances, information in your psychological record may be used and disclosed for research purposes, subject to a special approval process. Potential researchers may be allowed to review information that may help them prepare for research, so long as the health information they review does not leave this facility, and so long as they agree to specific privacy protection. Information in your psychological record may be disclosed to a friend or family member whom you designate or in appropriate circumstances, unless you request a restriction. Information may be disclosed to disaster relief authorities so that your family can be notified of your location and condition.

Other uses of information in your psychological record:

In any other situation not covered by HIPPA law, including the use or disclosure of psychotherapy notes, I will ask for your written authorization before using or disclosing medical/psychological health information about you. If you choose to authorize use or disclosure, you can later revoke that authorization by notifying me in writing of your decision.

Who will follow this notice?

Elise Nunez, MA, LPC of Vibrant Minds Counseling, LLC provides psychological health care to participants in partnership with other professionals and healthcare organizations. The privacy practices described in this notice will be followed by:

- Elise Nunez, MA, LPC of Vibrant Minds Counseling, LLC.
- Any medical or mental health professional who supports my treatment of you in consultation and/or supervision.
- Any Business Associate who supports healthcare operations per binding HIPPA HITECH Business Associate Agreement.

Right to be notified of a breach:

I will notify you in the event that the confidentiality of your information has been breached.

Right to access and/or amend your records:

In most cases, you have the right to look at or obtain a copy of medical information that I use to make decisions about your care. All requests for copies or access must be submitted in advance, in writing. If your request for inspection is granted, I will arrange for a convenient time and place for you to look at your record. If you request copies, I may charge a fee for the cost of copying, mailing, or other related supplies. If denied your request to review or obtain a copy, you may submit a written request for a review of that decision.

If you believe that information in your record is incorrect or that important information is missing, you have the right to request that I correct the records by submitting in writing a request that provides your reason for requesting the proposed amendment. I could deny your request to amend a record if the information is not maintained or if I determine that your record is accurate. You may submit a written statement of disagreement with a decision not to amend a record.

Vibrant Minds Counseling, LLC Developing Vibrant Minds for Transformative Lives

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Right to an accounting:

You have the right to request a list accounting for any disclosures made from your psychological record, except for uses and disclosures for treatment, payment, and healthcare operations, circumstances in which you have specifically authorized such disclosure and certain other exceptions. To request this list of disclosures, indicate the relevant period, which must be after April 14, 2003, but in no event for more than the last six years. You must submit your request in writing to the address at the top of page one of this form.

Right to request restrictions:

You may request, in writing, that I not use or disclose information in your psychological record for treatment, payment or healthcare operations or to persons involved in your care except when specifically authorized by you, when required by law, or in an emergency. I will consider your request and work to accommodate it when possible, but I am not legally required to accept it unless all the conditions below are met:

- You request that your information is not shared with an insurer for purposes of payment or other purposes unrelated to your treatment;
- You pay all charges associated with the services you received out-of-pocket in full; and I am not required by law to release your information to the insurer.

I will inform you of the decision on your request. All written requests or appeals should be submitted to me, your clinician, Elise Nunez, MA, LPC of Vibrant Minds Counseling, LLC.

Requests for confidential communications:

You have the right to request that information in your psychological record be communicated to you in a confidential manner, such as sending mail to an address other than your home, by notifying me in writing of the specific way or location for me to use to communicate with you.

Right to request a paper copy of this Notice:

You may receive a paper copy of this Notice from me upon request, even if you have agreed to receive this notice electronically.

Changes to this Notice:

Policies may change at any time. Changes will apply to mental health information I already hold, as well as new information after the change occurs. Before there is a significant change in policy, I will change my notice and post the new notice in waiting areas, consultation rooms, and on my website www.vibrantmindscounseling.com. You can receive a copy of the current notice at any time. The effective date is listed at the end. Copies of the current notice will be available each time you come to the office for treatment. You will be asked to acknowledge in writing your receipt of this notice.

Complaints:



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If you are concerned that your privacy rights may have been violated, or you disagree with a decision made about access to your records, you may contact me, your clinician, Elise Nunez, MA, LPC of Vibrant Minds Counseling, LLC as listed below. If you are not satisfied with my response, you may send a written complaint to the U.S. Department of Health and Human Services Office of Civil Rights. I can provide you the address. Under no circumstances will you be penalized or retaliated against for filing a complaint.

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> *Please visit the U.S. Department of Health and Human Services website for further information http://www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html

> > Effective 12/15/2018