



Psalm 46 Counseling Notice of Privacy Practices (NOPP)

A client's mental health record contains personal health information referred to as "PHI". PHI may identify the client and relates to past, present, or future physical or mental health condition(s) and related health care services. This Notice of Privacy Practices describes 1) how Providers within Psalm 46 Counseling may use and disclose a client's PHI in accordance with applicable law, 2) client's rights, and 3) how the client may gain access to and control their PHI.

Psalm 46 Counseling is required by law to maintain the privacy of all clients' PHI and to abide by the terms of this Notice of Privacy Practices (NOPP), which includes notice of the legal duties and privacy practices with respect to PHI. We reserve the right to change the terms of our NOPP at any time; any new NOPP will be effective for all PHI that we maintain at that time. We will provide all clients with a copy of any revised NOPP by posting a copy on the Psalm 46 Counseling website, providing one at the next appointment, or sending a copy to all active clients in the mail or email, upon request.

How we may use/disclose PHI:

- With Initial Written Consent for Treatment
 - Treatment and Care Management: By consenting to treatment with Psalm 46 Counseling, a client's PHI may be used/disclosed for the purpose of providing, facilitating, coordinating, or managing health care treatment and related service with other healthcare providers.
 - Payment: By consenting to treatment with Psalm 46 Counseling, we may use and disclose your PHI for payment purposes, to assist in payment activities with other healthcare providers. This includes but is not limited to, determining eligibility for benefits, obtaining payment from insurers who may be responsible for providing coverage to you (includes Federal and State entities),
 - Health Care Operations: PHI may be used/disclosed to third-party services for the purposes of Health Care Operations related to treatment and payment, including, but not limited to, care management, quality improvement activities, resolving complaints and grievances, and assisting in other healthcare providers in performing healthcare operations.
- With Separate Authorization
 - Authorization for Coordination of Care: Many clients wish to involve other parties in their treatment, which requires coordination on the Authorization of Coordination of Care form. We may only disclose a client's PHI to professionals outside of Psalm 46 Counseling with prior written authorization. This authorization, which includes the release of psychotherapy notes and treatment summaries, may be revoked at any time, will be reviewed/updated every year, and will expire on the date listed on the Authorization form.
 - Family Members: If a client wishes to involve other family members in their care, they may give prior verbal authorization. This will be noted in the client's file; the client may revoke this authorization at any time.
 - Psychotherapy Notes: A client's psychotherapy notes may not be used without written authorization except by the Provider who created the note for treatment or by the Provider for training, defense in legal proceedings brought by the client, in an HHS compliance investigation, to avert a serious or imminent threat to public health or safety, or by another health oversight agency for the lawful oversight of the notes.
 - Marketing Purposes: If a client wishes to be involved in Marketing efforts (i.e. communications about health-related products or services, providers in a health plan network, treatment of the client for recommending therapies, treatments, or care settings), the client may give their written consent for their PHI to be used and/or disclosed in this way.
- Without Separate Authorization (Verbal or Written)
 - As required by Law: Under the law, we must make disclosures in certain circumstances. These circumstances include
 - The Secretary of the Department of Health and Human Services for the purpose of investigating or determining compliance with the requirements of the Privacy Rule
 - The Texas Behavioral Health Executive Council, the Texas State Board of Social Work Examiners, and/or the Department of Health and Human Services for the purposes of audits or investigations
 - Department of Family Protective Services for the purpose of reporting abuse and/or neglect
 - The courts for judicial and administrative proceedings, by court order
 - Law Enforcement or others reasonably able to prevent or lessen threat of harm to the client/the public in case of an emergency, national security concerns, or concerns for public safety (Duty to Warn)
 - Appointments, Information, and Services: We may contact you to provide appointment reminders or to communicate information regarding your treatment or other related services that may be of interest to you.
 - Health Oversight Activities: We may disclose your PHI to Federal or State Health Oversight Agencies for audits, investigations, inspections, and licensing surveys.
 - Specialized government functions. We may use or disclose your health information to provide assistance for certain types of government activities. If you are a member of the armed forces of the United States or a foreign country, we may disclose your health information to appropriate military authority as is deemed necessary. We may also disclose your health information to federal officials for lawful intelligence or national security activities.

- Workers' Compensation. We may use or disclose your health information as permitted by the laws governing the Workers' Compensation program or similar programs that provide benefits for work-related injuries or illnesses.
- Incidental Uses and Disclosures. Incidental uses and disclosures of your health information sometimes occur and are not considered to be a violation of your rights. Incidental uses and disclosures are by-products of otherwise permitted uses or disclosures which are limited in nature and cannot be reasonably prevented.

A Client's Rights Regarding His or Her Own PHI

All clients have the following rights regarding their own PHI maintained by our office. To exercise any of these rights, please submit a request verbally to your Provider or in writing to the Privacy Officer, Kaitlin Tollison, LCSW-S, at PO Box 1403, Springtown, Texas, 76082

- Right of Access to Inspect and Copy
 - All clients have the right to inspect and copy PHI that may be used to make decisions about a client's care. The client's right to inspect and copy PHI will be restricted only in those situations where there is compelling evidence that access would cause serious harm.
- Right to Amend
 - If a client feels that his or her PHI is incorrect or incomplete, the client may request an amendment to the information. Please note that an agreement to the requested amendment is not guaranteed.
- Right to an Accounting of Disclosures
 - All clients have the right to request an accounting of certain PHI disclosures.
- Right to Request Restrictions
 - All clients have the right to request a restriction or limitation on the use or disclosure of PHI for treatment or health care operations. An agreement to the request is not guaranteed.
- Right to Request Confidential Communication
 - All clients have the right to request that we communicate about medical matters in a certain way or at a certain location.
- Right to Copy of this Notice
 - All clients have the right to a copy of this notice.

Breach Notification

If there is a breach of a client's unsecured PHI, we may be required to notify the client of this breach, including what happened and what the client can do to protect themselves. The client authorizes Psalm 46 Counseling to provide notice verbally or in written form in the event of a breach of a client's PHI.

Provider's Right to Amend

Occasionally, changes to law and practice standards require internal edits and/or updates to our documents. We reserve the right to change the terms of our documents at any time; these changes will be reflected in the previously signed documents in the client's electronic record. We will provide all clients with a copy of any revised documents by sending a copy to all active clients in the mail or email upon request or providing a copy at the next appointment. The client will not be required to sign new documents unless the changes affect the way in which clients interact with the counselor.

Complaints

If any individual believes someone with Psalm 46 Counseling has violated Privacy Rights, the individual has the right to file a complaint. The individual may do so by using the Complaints Form found by visiting psalm46counseling.com or by contacting Kaitlin Tollison, LCSW-S, the HIPAA Privacy and Security Officer, at PO Box 1403, Springtown, Texas, 76082. An individual may also file a complaint with the Secretary of Health and Human Services at 200 Independence Avenue, S.W., Washington, D.C. 20201, or by calling (202) 619-0257 (HIPAA concerns) or with the Texas Behavioral Health Executive Council at 333 Guadalupe St., Ste. 3-900, Austin, Texas, 78701 or by calling 1-800-821-3205. The law prohibits any retaliation against any persons for filing a complaint. All complaint records are kept for 6 years of the creation or effective date.

Notice of Privacy Practices: Acknowledgement of Notice

I hereby acknowledge that I have been given an opportunity to read the Privacy Practices for Psalm 46 Counseling. I understand that if I have any questions regarding the Notice of my privacy rights, I can contact the Privacy and Security Officer (Kaitlin Tollison, LCSW-S) at PO Box 1403, Springtown, Texas, 76082 or (817) 866-8347.

Client/Guardian Signature

Date

The effective date of this Notice is July 1, 2023.