



LTM Counseling and Wellness, PLLC

HIPAA Notice of Privacy Practices

THIS NOTICE DESCRIBES HOW MEDICAL/MENTAL HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE READ IT CAREFULLY AND SIGN AT THE BOTTOM.

Any information released is in accordance with state and federal laws and the ethics of the counseling profession. This notice describes LTM Counseling and Wellness's policies related to the use and disclosure of protected health information for the purposes of providing services. Providing treatment services, collecting payment and conducting healthcare operations are necessary activities for quality care. State and federal laws allow us to use and disclose your health information for these purposes.

This notice is effective as of December 23rd, 2019.

How We May Use and Disclose Your Health Information

- Treatment - We can use and disclose your health information in order to provide, manage, or coordinate care for your treatment with other health professionals, as well as for referral sources where appropriate or necessary.
- Payment - We can use and disclose your health information to verify insurance and coverage, process claims, and collect fees.
- Healthcare Operations - We can use and disclose your health information to run the practice, improve your care, and contact you when necessary.

Other Uses and Disclosures Without Consent

- Mandated Reporting (Duty to Warn)
 - Reporting suspected abuse, neglect, or domestic violence
 - If it is reasonably believed that a client is a danger to themselves or anyone else
 - If it is reasonably believed another person is a danger to the client
 - If it is believed that it is necessary to prevent or lessen a serious and imminent threat to the safety of a person or the public
 - If ordered by a court, subpoena, or other legal processes as required by law



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Your Rights Regarding Your Health Information

Contact

You have the right to request where and how we are allowed to contact you. For example, if you would like to utilize a different phone number or address for confidential communications.

Medical Records

You have the right to release your medical records with a written authorization, as well as the right to revoke a release of records in writing at any time. Please note this will not affect any use or disclosure made prior to the written request for revocation.

Medical Billing Records

You have the right to inspect and request a copy of billing records. A summary of your health information will be provided within a reasonable amount of time and a fee may be charged.

Additions or Amendments

You have the right to request an addition or amendment to your health information that you believe is incorrect or incomplete. Requests must be submitted in writing and you must provide sufficient information to support your request. There is a possible 30-day waiting period for decision to be rendered and the request may be denied for various reasons. If your request is denied, you have the right to file a disagreement statement. All requests and responses will become part of your record.

Accounting of Disclosures

You have the right to request an account of disclosures made, with exceptions including disclosures for treatment, payment, healthcare operations, previously authorized releases of information, and disclosures for national security or law enforcement.

Restrictions and Disclosures

You have the right to request restrictions for the sharing of certain healthcare information as it relates to treatment, payment, or operations. All requests must be made in writing and may be denied if the request would negatively impact your level of care.

Complaints

You have the right to file a complaint if you feel your rights have been violated. Your first step should be to contact us directly. You may also file a complaint with the U.S. Department of Health and Human Services. There will be no retaliation against you for filing a complaint.

Changes in Policy

You have the right to request any future changes in policy that may be instituted. If you have a privacy officer, that person can exercise your rights and make choices about your health information.

Client/ Guardian Signature

Date