

Notice of Privacy Practices

Spink Psychology, PLLC

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Effective February 2022

HIPAA and Privacy Policy

Spink Psychology, PLLC is mandated by the Federal Health Insurance Portability Accountability Act (HIPAA) standard of privacy to ensure confidentiality for all patients. This document will describe how Spink Psychology, PLLC may use and disclose your psychological and medical information, as well as how you can get access to this information. Please review it carefully and let us know if you have any questions.

Definitions

To help clarify the following information, here are some useful definitions:

- **Protected Health Information (PHI)** refers to information in your health records that could identify you. This information could include, but is not limited to, your name, date of birth, and phone number.
- **Treatment** is when your clinician provides, coordinates, or manages your healthcare or services related to your health care. This may include, but is not limited to, consultation with another health care provider (such as another staff member at Spink Psychology, PLLC or your primary care provider).
- **Payment** is when Spink Psychology, PLLC obtains money for your healthcare. Examples of payment include services rendered or submitting past due accounts to a collection agency.
- **Reimbursement** is when Spink Psychology, PLLC submits information to your insurance company so that you can be reimbursed for the services rendered.
- **Health care operations** refer to performance and operations of the practice including quality assessment and improvements activities, administrative services, and case management.
- **Use** refers to activities within Spink Psychology, PLLC, such as sharing, employing, applying, utilizing, examining, and analyzing information that identifies you.
- **Disclosure** refers to activities outside of Spink Psychology, PLLC, such as releasing, transferring, or providing access to information about you to other parties.

· **Authorization** refers to your written and/or verbal permission that permits only specific disclosures. Authorization may also be referred to as consent in some contexts.

Uses and disclosures requiring your authorization

In most cases, Spink Psychology, PLLC may use or disclose your protected health information (PHI) only with your authorization (notably, there are some exceptions to this as noted in the next section). This can include purposes outside of treatment, payment, and health care operations, as well as using or disclosing any information not covered in this document. You may revoke such authorizations at any time, provided each revocation is in writing.

Uses and disclosures for treatment, payment, and health care operations

We may use or disclose your protected health information (PHI) for treatment, payment, and healthcare operations purposes without your consent. We may also use or disclose your PHI without consent or authorization in the following circumstances:

- **Child abuse:** If, in your clinician's professional capacity, a situation comes before your clinician which he/she has reasonable cause to suspect a child is being abused or maltreated child, or he/she has reasonable cause to suspect a child is abused or maltreated where the parent, guardian, custodian, or other person legally responsible for such child comes before your clinician in her/his professional or official capacity and states from personal knowledge facts, conditions, or circumstances which, if correct, would render the child an abused or maltreated child, your clinician must report such abuse or maltreatment to the state wide central register of child abuse and maltreatment, or the local child protective services agency.
- **Health Oversight:** If there is an inquiry or complaint about your clinician's professional conduct to the New York State Education Department or their Professional Board, we must furnish the New York Commission of Education, your confidential records relevant to the inquiry.
- **Judicial or Administrative Proceedings:** If you are involved in a court proceeding and a request is made for information about the professional services that have been provided to you by Spink Psychology, PLLC and/or for the records thereof, such information is privileged under state law, and we must not release this information without your written authorization or a court order. The privilege does not apply when you are being evaluated for a third party or where the evaluation is court ordered. Your clinician will make attempts to inform you in advance if this is the case. If you are involved in, or contemplating litigation, you should consult with your attorney to determine whether a court would be likely to order your clinician to disclose information.
- **Complaints or lawsuits:** If a patient files a complaint or lawsuit against their clinician, he/she may disclose the relevant information regarding the patient in order to defend himself/herself.
- **Series threat to health or safety:** Your clinician may disclose your confidential information to protect you or others from a serious threat of harm by you. If you threaten to harm yourself, your clinician may be obligated to seek hospitalization for you or to contact your family members or others who can help provide protection.

- **Billing/Payment:** Spink Psychology, PLLC uses a HIPAA compliant online payment processing system. As required by HIPAA, we have a formal business associate agreement with the business, in which they promise to maintain confidentiality of this data except as specifically allows in the contract or otherwise required by law. If you wish, Spink Psychology, PLLC can provide you with the names of these organization.
- **Health insurer and/or overdue fees:** Disclosures may be required by your health insurer. Please be aware that if you elect to be reimbursed by your health insurance, your insurer will obtain information from your records to allow for said reimbursement. If you do not choose to use your healthcare, you may restrict disclosures of your PI to a health plan. Furthermore, if your account is more than 60 days overdue and suitable arrangements for payment have not been agreed to, Spink Psychology, PLLC has the option of using legal means to secure payment including collection agencies or small claims court. If such legal action is necessary, the cost of bringing the proceedings will be included in the claim.
- **Law:** When the use and disclosure without your consent or authorization is allowed under New York State's confidentiality law. This includes those to a medical examiner or coroner, as well as specialized government functions such as national security and intelligence.
- **Workers' compensation:** If you file a worker's compensation claim, and your clinician is treating you for the issue involved with that complaint, then he/she must furnish to the chairman of the Worker's Compensation Board records which contain information regarding your psychological condition a treatment.

Patient's rights

- **Right to request restrictions:** You have the right to request restriction on certain uses and disclosures of PHI about you. However, Spink Psychology, PLLC is not required to agree to a restriction you request.
- **Right to receive confidential communications by alternative means and at alternative locations:** You have the right to request and receive confidential communications of PHI by an alternative mean or to an alternative location/address. For example, you may not want a household member to know that you are seeing a clinician. Upon your request, we will send your bills and other documents to another address.
- **Right to inspect and copy:** You have the right to inspect or obtain a copy (or both) of PHI and psychotherapy notes in our health and billing records used to make decisions about you for as long as the PHI is maintained in the record. Your clinician may deny your access to PHI under certain circumstances, but in some cases, you may have this decision reviewed. On your request, your clinician will discuss with you the details of the request and denial process.
- **Right to amend:** You have the right to request an amendment or chant of PHI for as long as the PHI is maintained in the record. Your clinician may deny this request. On your request, your clinician will discuss with you the details of the amendment process.
- **Right to an accounting:** You generally have the right to receive an accounting of disclosures of PHI for which you have neither provided consent not authorization (as described above). On your request, your clinician will discuss with you the details of the accounting process.

- **Right to a paper copy:** You have the right to obtain a paper copy of the notice from your clinician upon request, even if you have agreed to receive the notice electronically.

Psychologists Duties

- We are required by law to maintain the privacy of PHI and to provide you with a notice of our legal duties and privacy practices with respect to PHI.
- We reserve the right to change the privacy policies and practices described in this document. Unless we notify you of such changes, we are required to abide by the terms currently in effect.
- If we revise our policies and procedures, we will provide you with such revisions either electronically or in paper form.

Questions and complaints

- If you have questions about this document, disagree with a decision we make about access to your records, or have another concern about your privacy rights, you may contact Dr. Garry L Spink Jr., Owner at 315-691-0900.
- If you believe that your privacy rights have been violated and wish to file a complaint with us, you may send your written complaint to: Dr. Garry L. Spink Jr. PO Box 3115 Liverpool, NY 13089
- You may also send a written complaint to the secretary of the U.S. Department of Health and Human Services. We can provide you with the appropriate address upon request.
- You have specific rights under the Privacy Rules, and we will not retaliate against you for exercising your right to file a complaint.

Effective date, restrictions, and changes to Privacy Policy.

This document will go into effect as of March 2022.