

TURNING POINT PSYCHOTHERAPY ASSOCIATES, LLC
Notice of Policies and Practices to Protect the Privacy of Your Health Information

This notice describes how your Protected Health Information (PHI) may be used and disclosed and how you can get access to this information. Please review it carefully.

Turning Point Psychotherapy Associates, LLC (TPPA) is required by law to maintain the privacy of your Protected Health Information (PHI). PHI refers to the information in your health record that could identify you and be disclosed. This notice explains our legal duties and privacy practices with regard to your PHI. We are required by law to provide you with a copy (paper or electronic) of this notice and abide by the terms of this notice. Accordingly, we will ask you to sign a statement acknowledging that we have provided you with a copy of this notice. We also reserve the right to change the terms of this notice at any time. The change may be retroactive and cover PHI that we received or created prior to the revision. Unless we notify you of such changes, however, we are required to abide by the terms currently in effect. If TPPA revises its policies and procedures, we will post the revised notice prominently in the office. You may also request a written copy of the revised notice.

I. Uses and Disclosures for Treatment, Payment, and Health Care Operations

TPPA may use or disclose your PHI, **with your consent**, for the purposes of treatment, payment, and health care operations. To help clarify these terms, here are some definitions and examples:

- **Treatment** refers to TPPA clinicians disclosing your PHI in order to provide, coordinate or manage your health care and other services related to such. For example, we may consult with another provider, such as your family physician or another clinician, for the purpose of continuity of care.
- **Payment** refers to reimbursement for your healthcare. An example of this type of PHI disclosure would be to your insurance carrier so that we may obtain reimbursement for your health care or to determine eligibility or coverage.
- **Health Care Operations** are matters that relate to the performance and operation of TPPA. Examples of health care operations are quality assessment and improvement activities, business-related matters, such as audits and administrative services, and case management and care coordination.
- **Use** refers to activities within our practice, such as sharing, employing, applying, utilizing, examining, and analyzing information that identifies you.
- **Disclosure** applies to activities outside of our practice, such as releasing, transferring, or providing access to information about you to other parties.

II. Uses and Disclosures Requiring Authorization

TPPA may use or disclose PHI for purposes outside of treatment, payment, and health care operations when your authorization is obtained. An "authorization" is written permission above and beyond the general consent that permits only specific disclosures. In those instances, when we are asked for information for purposes outside of treatment, payment and health care operations, we will obtain an authorization from you before releasing this information. We will also need to obtain an authorization before releasing your psychotherapy notes. Psychotherapy notes are ones made by your practitioner about conversations during a private, group, joint, or family counseling session, which are kept separate from the rest of your medical record. These notes are given a greater degree of protection than PHI. You may revoke all authorizations of PHI or psychotherapy notes at any time, provided each revocation is in writing. You may not revoke an authorization to the extent that (1) TPPA has relied on that authorization; or (2) the authorization was obtained as a condition of obtaining insurance coverage, and the law provides the insurer the right to contest the claim under the policy. TPPA will also obtain an authorization from you before using or disclosing PHI in a way that is not described in this notice.

III. Uses and Disclosures with Neither Consent nor Authorization

TPPA may use or disclose PHI **without your consent or authorization** under the following circumstances:

- **Child Abuse:** If we have reasonable cause, on the basis of our professional judgment, to suspect abuse of a child with whom we have contact, directly or indirectly, in our professional capacity, we are required by law to report this to the Pennsylvania Department of Public Welfare.

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- **Adult and Domestic Abuse:** If we have reasonable cause to believe that an older adult is in need of protective services (regarding abuse, neglect, exploitation or abandonment), we may report such to the local agency which provides these services.
- **Judicial or Administrative Proceedings:** If you are involved in a court proceeding and a request is made about the professional service TPPA has provided to you, or the records thereof, such information is privileged under state law, and we will not release that information without your written consent, or a court order. The privilege does not apply when you are being evaluated for a third party or when the evaluation is court- ordered. You will be informed in advance if this is the case.
- **Serious Threat to Health or Safety:** If you express a serious threat to harm or intent to kill or seriously injure an identified or readily identifiable person or group of people, and we determine that you are likely to carry out the threat, TPPA must take reasonable measures to prevent harm. Reasonable measures include directly advising the potential victim(s) of the threat or intent, as well as local authorities and law enforcement.
- **Worker's Compensation:** If you file a worker's compensation claim, TPPA will be required to file periodic reports with your employer which shall include, where pertinent, history, diagnosis, treatment, and prognosis.
- **Section 164.512 of the Privacy Rule:** The use and disclosure without your consent or authorization is allowed under other parts of Section 164.512 of the Privacy Rule and the state's confidentiality law. This includes certain narrowly-defined disclosures to law enforcement agencies, a health oversight agency, such as HHS, a state department of health, a coroner or medical examiner, for public health purposes related to disease or FDA-regulated products, or for specialized government functions, such as fitness for military duties, eligibility for VA benefits, and national security and intelligence.

There may be additional disclosures of PHI that TPPA is required or permitted by law to make **without your consent** or authorization; however, the disclosures listed above are the most common.

IV. Patient's Rights

- **Right to Request Restrictions:** You have the right to request restrictions on certain uses and disclosures of your PHI; however, TPPA is not required to agree to a restriction you may 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 alternative means and at alternative locations. For example, you may not want a family member to know that you are being treated at TPPA. Upon your request, we will send your bills to another address. The request must be in writing, but we will not ask for an explanation from you. We will accommodate reasonable requests, but we may condition the accommodation on information as to how payment, if any, will be handled and specification of an alternative address or other method of contact.
- **Right to Inspect and Copy:** You have the right to inspect or obtain a copy (or both) of the PHI in your mental health and billing records that is used to make decisions about you, for as long as the PHI is maintained in the record. If you want to exercise this right, please submit a request to access your records in writing. This right does not extend to psychotherapy notes, information compiled in reasonable anticipation of legal action, or confidential information relating to certain lab tests. We may deny your access to PHI under certain circumstances but, in some cases, you may have this decision reviewed. Upon request, we will discuss the details of the request and denial process with you.
- **Right to Amend:** You have the right to request an amendment of your PHI. In order to exercise this right, please make your request in writing. You will need to provide a reason for the amendment. TPPA may deny your request if we determine that we did not create your record, is not maintained by us, would not be available for access or is accurate and complete. Your records will not be changed or deleted as a result of our granting your request, but the amendment will be attached to your record and its existence noted in your record, as deemed necessary. Use of this amendment process is not necessary for routine change to your demographic information, such as address, phone number, etc. Upon request, we will discuss the details of the amendment process with you.
- **Right to an Accounting:** In general, you have the right to receive an accounting of disclosures of PHI for which you have neither provided consent nor authorization (as described in Section III above). If you want to exercise this right, please provide your request in writing. The accounting does not have to list disclosures made to carry out treatment, payment and healthcare operations, to you; pursuant to an authorization; for national security or intelligence purposes; to correctional institutions or law enforcement personnel; or that occurred prior to April 14, 2013. Compliance with this right is time consuming and we do

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reserve the right to charge you a fee if you request more than one accounting in a 12-month period. Upon your request, we will discuss the details of the accounting process with you.

- **Right to a Paper Copy:** You have the right to obtain a paper copy of this notice from TPPA, even if you have agreed to receive this notice electronically.
- **Right to Restrict Disclosures for Out-of-Pocket Payers:** You have the right to restrict certain disclosures of PHI to a health plan when you pay out-of-pocket, in full, for TPPA services.
- **Right to be Notified of Breach of PHI:** You have the right to be notified: 1) if there is a breach of your PHI; i.e., a use or disclosure of your PHI in violation of the HIPPA Privacy Rule; (2) if PHI has not been encrypted to government standards; and (3) if our risk assessment fails to determine that there is a low probability that your PHI has been compromised.

V. Organizational Policies

In order to facilitate the smooth and efficient operations of TPPA, we engage in certain practices and policies that you should understand. You can avoid any of the following practices by discussing your concerns with us and working out an alternative arrangement, if possible.

- We may contact our patients by telephone and may leave a message on an answering machine or voicemail, in order to provide appointment reminders or other pertinent administrative information.
- We may share PHI with third-party business associates that perform various functions for the practice (billing, for example) and we have written contracts with those entities containing terms that require the protection of your PHI.
- We may disclose PHI to your personal representative, if applicable, unless we determine in the exercise of our professional judgment, that such disclosures should not be made.

VI. Effective Date, Restrictions and Changes to Privacy Policy

The effective date for this notice is October 1, 2018. TPPA reserves the right to change the terms of this notice and to make the new notice effective for all PHI that we maintain. We will provide you with a revised notice by posting it prominently in our office and on our website. You may also request a written copy of the revised notice.

Questions and Complaints

If you have questions about this notice, disagree with a decision TPPA has made about access to your records, believe that your privacy rights have been violated, or have any other concerns, you may contact our Privacy and Security Officer, Erin Jameson Saltzburg, LCSW, at 484-879-4292. TPPA will not retaliate against you for exercising your right to file a complaint.