

**Mindy Maxwell, LMHC, Mindy Maxwell Clinical Services, PLLC
652 SW 150th Street Suite A Burien, WA 98166 (415) 903-0452
Notice of Privacy Practices**

Your Information.

Please read this notice carefully, it describes how information that you may be used and disclosed and how you can get access to this information. This "Protected Health Information" includes information I have created or received regarding your past or present physical or mental health, regarding the provision of your healthcare regarding payment for services. It includes personal information such as your name, Social Security number, address, phone number, dates of service, diagnosis, etc. Please note that these rights apply to persons aged 13 and older. This notice is effective as of December 2013. Privacy contact is Mindy Maxwell, LMHC at mindymaxwell@gmail.com or 415-903-0952

A) Your Rights You have the right to:

- Get a copy of your paper medical record
- Correct your paper medical record
- Request confidential communication
- Ask Mindy Maxwell Clinical Services to limit the information shared
- Get a list of those with Mindy Maxwell Clinical Services shared your information
- Get a copy of this privacy notice
- Choose somebody to act for you
- File a complaint if you think your privacy rights have been violated

B) Your Choices

You have some choices in the way Mindy Maxwell Clinical Services uses and shares information in the course of providing treatment and/or telling family and friends about your condition, either because you have asked Mindy Maxwell Clinical Services to do so or if needed to lessen a serious and imminent threat to health or safety.

C) Mindy Maxwell Clinical Services Uses and Disclosures

Mindy Maxwell Clinical Services may use and share your information as Mindy Maxwell Clinical Services

- Treat you
- Consult a supervisor about your treatment-note that a supervisor is equally bound by these confidentiality provisions
- Bill for your services
- Help with public health and safety issues
- Comply with the law
- Address workers' compensation, law enforcement and other government requests
- Respond to lawsuits in legal actions

A) Your Rights

When it comes to your health information, you have certain rights. This section explains your rights and some of my responsibilities to help you.

Get a paper copy of your medical record

- You can ask to see or get a paper copy of your medical records and other health information Mindy Maxwell Clinical Services has about you. Ask Mindy Maxwell Clinical Services how to do this.
- Mindy Maxwell Clinical Services will provide a copy or a summary of your health information, usually within 30 days of your request. Mindy Maxwell Clinical Services may charge a reasonable, cost-based fee.

Ask Mindy Maxwell Clinical Services to correct your medical record

- You can ask Mindy Maxwell Clinical Services to correct health information about you that you think is incorrect or incomplete. Ask Mindy Maxwell Clinical Services how to do this.
- Mindy Maxwell Clinical Services may say “no” to your request but Mindy Maxwell Clinical Services will tell you why in writing within 60 days.

Request confidential communications

- Ask Mindy Maxwell Clinical Services to contact you in the specific way (for example home or office phone, specific email address.)
- Mindy Maxwell Clinical Services will say “yes” to all reasonable request.
- Please note that digital communications (cell phone, email, etc.) are not secure transmissions. Thus emails would be best limited to discussing scheduling. If you are concerned that communication over the cell phone could lead to a confidentiality breach, please ask me to only use hardwired phone line to call you. In addition, note that all phone conversations, voice mails and emails that contain therapeutic content will be placed your medical record/will become part of the record. I am not required to put communications about logistics (such as scheduling, fees, etc.) in your clinical record.

Ask Mindy Maxwell Clinical Services to limit use or share

- You can ask Mindy Maxwell Clinical Services not to use or share certain health information for treatment, payment or my operations. Mindy Maxwell Clinical Services is not required to agree with your request and Mindy Maxwell Clinical Services may say “no” if it would affect your care.
- If you pay for a service or healthcare item out of pocket in full, you can ask me not to share that information for the purposes of payment or my operations within your health insurer. Mindy Maxwell Clinical Services will say “yes” unless a law requires Maxwell Clinical Services to share that information.

Get a list of those with whom Mindy Maxwell Clinical Services has shared information

- You can ask for a list update (accounting) of the times Mindy Maxwell Clinical Services to share health information for six years prior to the date of you ask, who Mindy Maxwell Clinical Services shared it with and why.
- Mindy Maxwell Clinical Services will include all the disclosures except for those about treatment, payment, healthcare operations and certain other disclosures (any you asked Mindy Maxwell Clinical Services to make). Mindy Maxwell Clinical Services will provide one accounting/year for free but will charge a reasonable, cost-based fee if you ask for another within 12 months.

Get a copy of this privacy notice

You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. Mindy Maxwell Clinical Services will provide you with a paper copy promptly.

Choose someone to act for you

- If you have given someone medical power of attorney or if someone is your legal guardian, that person can you exercise your rights and make choices about her health information.
- Mindy Maxwell Clinical Services will make sure the person has this authority and can act for you before Mindy Maxwell Clinical Services take any action.

File the complaint if you think your rights have been violated

- If you think Mindy Maxwell Clinical Services has violated your rights, you can complain by writing Mindy Maxwell Clinical Services at the address on page 1.
- You can file a federal complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue SW, Washington, DC 20201, calling 1– 877– 696– 6775, or visiting <https://www.hhs.gov/hipaa/index.html>.
- You may file a state complaint with the Secretary of the U.S. Department of Health and Human Services for Washington State Department of Health at 360-236-4700 or visiting <https://www.doh.wa.gov/LicensesPermitsandCertificates/FileComplaintAboutProviderorFacility>
- Mindy Maxwell Clinical Services will not retaliate against you for filing a complaint.

B) Your Choices

For certain health information, you can tell Mindy Maxwell Clinical Services your choices about what Mindy Maxwell Clinical Services share. If you have a clear preference for how Mindy Maxwell Clinical Services share your information in this situation described below, talk to Mindy Maxwell Clinical Services. Tell Mindy Maxwell Clinical Services what you want Mindy Maxwell Clinical Services to do and Mindy Maxwell Clinical Services will follow your instructions.

In these cases, you have both the right and the choice to tell Mindy Maxwell Clinical Services to:

Share information with your family, close friends or others legally permitted to interact in your care.

If you are not able to tell Mindy Maxwell Clinical Services your preference, Mindy Maxwell Clinical Services may share your information if needed to lessen a serious and imminent threat to health and safety.

Appointment reminders or contacts: please let me know if you would like me not to leave messages on any of your phone numbers-i.e. that voicemail is not confidential.

Mindy Maxwell Clinical Services will never share this information unless you give Mindy Maxwell Clinical Services written permission:

- Psychotherapy notes
- Substance abuse treatment records
- Records related to STDs, AIDS or HIV
- Mindy Maxwell Clinical Services does not and will not market or sell personal information.

C) Mindy Maxwell Clinical Services' Uses and Disclosures

Treat You

Mindy Maxwell Clinical Services can use your health information and share it with other professionals who were treating you.

Example: A doctor treating you for a mental health or related condition requests information about your counseling treatment.

Run my Business

Mindy Maxwell Clinical Services can use and share your health information to run the business, improve your care and contact you when necessary.

Example: Mindy Maxwell Clinical Services use health information about you to manage your treatment or services.

Bill for your services

Mindy Maxwell Clinical Services can use and share your health information to bill/get payment from health plans or other entities.

Example: Mindy Maxwell Clinical Services gives information about your health insurance plan so it will pay for your services.

Other uses and disclosures

The next five disclosure types are ones with which you may not be familiar. Mindy Maxwell Clinical Services is allowed/or be required to share your information in other ways-usually in ways that contributes to the public good, such as the public health and research. Mindy Maxwell Clinical Services has to meet many legal conditions before Mindy Maxwell Clinical Services can share your information for these purposes, and the information is usually stripped of *personally identifiable information (name, date of birth, street address, etc.). For more information: <https://www.hhs.gov/hipaa/for-individuals/index.html>.

1) Help with public health and safety issues

Mindy Maxwell Clinical Services can share health information about you for certain situations such as:

- Preventing disease
- Reporting suspected abuse, neglect or domestic violence
- Preventing or reducing a serious threat to anyone's health or safety

2) Do research

Mindy Maxwell Clinical Services can use or share your information for health research. However, this practice does not participate in health research.

3) Comply with the law

Mindy Maxwell Clinical Services will share information about you if state or federal laws require, including with the Department of Health and Human Services if it wants to see that Mindy Maxwell Clinical Services are complying with federal privacy law.

4) Address workers compensation, law enforcement and other government requests

These uses may not be stripped of personally identifiable information (name, date of birth, street address, etc.). Mindy Maxwell Clinical Services can use or share health information about you:

- For law enforcement purposes or with a law enforcement official
- With health oversight agencies for activities authorized by law
- For special government functions such as military, national security and presidential protective services

5) Respond to lawsuits and legal actions

Mindy Maxwell Clinical Services can share health information about you in response to a court or administrative order, or in response to a subpoena. These uses may not be stripped of personally identifiable information (name, date of birth, street address, etc.).

D) My Responsibilities

- Mindy Maxwell Clinical Services is required by law to maintain the privacy and security of your protected health information.
- Mindy Maxwell Clinical Services will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- Mindy Maxwell Clinical Services must follow the duties and privacy practices described in this notice and give you a copy of it.
- Mindy Maxwell Clinical Services will not use or share information other than as described here unless you tell Mindy Maxwell Clinical Services to do so in writing. If you tell Mindy Maxwell Clinical Services to do so, you may change your mind at any time. Let Mindy Maxwell Clinical Services know writing if you change your mind.

For more information see: <https://www.hhs.gov/hipaa/for-individuals/index.html>

E) Changes to the terms of this notice

Mindy Maxwell Clinical Services can change the terms of this notice and the changes will apply to all information Mindy Maxwell Clinical Services has about you. The new notice will be available upon request, in my office. Mindy Maxwell Clinical Services must ask you to sign to say you received this notice.

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**ACKNOWLEDGMENT OF RECEIPT FOR NOTICE OF PRIVACY PRACTICES AND
HEALTH CARE PROVIDER DISCLOSURE**

I, _____
(print client name)

or the parents or legal guardian of the patient

(print parent, guardian, or other representative name)

(if parent, guardian, or other representative print the type of representation)

acknowledge here that I have reviewed and been offered a copy of the following documents:

 X Notice of Privacy Practices

 Health Care Provider Disclosure Form

Signature of Patient (or Parent, Representative, or Legal Guardian)

Date

If acknowledgment of receipt has not been obtained:

I _____ (print name of health care provider) hereby
state that I made a good faith effort to obtain client's acknowledgment of receipt of the Notice
of Privacy Practice and Disclosure Form. I also indicate here the reason why the
acknowledgment was not obtained:

 client refusal

 other:

(signature of health care provider) Date