

Notice of Privacy Practices

Rooted In Me Therapy

(Effective June 2024)

This notice is developed in compliance with the Health

Insurance Portability and Accountability Act of 1996 (45CRF)

If you are a client of Rooted In Me Therapy this notice describes how your health information may be used and disclosed and how you can get access to this information. Please review this notice carefully.

I. Understanding Your Health Record/Information

As a client of Rooted In Me Therapy, a record is kept of your visit. This record contains your reason for seeking services, symptoms, diagnosis, and a plan of treatment for future services. Although this record is the property of Rooted In Me Therapy, the information within the record belongs to you. This information is considered your "Protected Health Information" (PHI) and is afforded certain protections under the law.

II. HITECH Amendments: Rooted In Me Therapy has included HITECH Act provision to its Notice as follows:

HITECH Notification Requirements. Under HITECH, Rooted In Me Therapy is required to notify clients whose PHI has been breached. Notification must occur by first-class mail within sixty (60) days of the event. A breach means the acquisition, access, use or disclosure of PHI in a manner not permitted under the Privacy Rule which compromises the security or privacy of such information. This Notice must: (1) contain a brief description of what happened, including the date of the breach and the date of discovery; (2) the steps the individual should take to protect themselves from potential harm resulting from the breach; and (3) a brief description of what Rooted In Me Therapy is doing to investigate the breach, mitigate losses, and to protect against further breaches.

Cash Clients

HITECH provides, that is a client pays in full for their services out of pocket, they can demand that the information regarding the service not be disclosed to the client's health plan since no claim is being made to the health plan.

Access to E-Health Records

HITECH expands this right, giving individuals the right to access their own e-health record in electronic format, and to direct Rooted In Me Therapy to send the e-health record directly to a third party. Rooted In Me Therapy may only charge for labor

costs under these new rules. Rooted In Me Therapy currently does not participate in E-Health Records, when this becomes an option, all clients will be notified.

III. How I May Use and Disclose Your Protected Health Information

Rooted In Me Therapy will not disclose your health information without your authorization, except as described in this notice.

Other

Treatment: Rooted In Me Therapy will use your health information to provide treatment. For example, information obtained will be recorded in your record and used to determine the course of treatment/services. Rooted In Me Therapy may consult with other healthcare professionals to coordinate

treatment/services. This will only be done to ensure the course of treatment/services is appropriate to your situation.

Payment: Rooted In Me Therapy will use your health information to receive payment for services rendered. For example, Rooted In Me Therapy may release portions of your health information to an insurance plan or other payer in order to receive payment for services provided to you.

Health Care Operations: Rooted In Me Therapy Your health information may be reviewed by regulatory and accrediting organizations to ensure compliance with their requirements.

When Required by Law: Rooted In Me Therapy may disclose your health information when a law requires that the therapist report information about suspected abuse, neglect, domestic violence, relating to suspected criminal activity, or in response to a court order.

Duty to Warn: Rooted In Me Therapy may disclose protected health information when a client communicates to her a serious threat of suicide or physical violence against himself, herself or a reasonably identifiable victim(s). In such an instance, Rooted In Me Therapy will notify either the threatened person(s) and/or law enforcement.

Notification: In an emergency, Rooted In Me Therapy, may use or disclose health information to notify or assist in notifying a family member, personal representative or another person responsible for your care, of your location and general condition.

Workers Compensation: Rooted In Me Therapy may disclose health information to the extent authorized by and to the extent necessary to comply with laws relating to worker's compensation or other similar programs established by the law.

Public Health: As required by federal and state law, Rooted In Me Therapy may disclose your health information to public health or legal authorities charged with preventing or controlling disease, injury or disability.

Correctional Institution: Should you be an inmate of a correctional institution, Rooted In Me Therapy may disclose to the institution health information necessary for your health and the health and safety of others.

Charges Against Rooted In Me Therapy: may disclose your health information to defend herself against any legal action you may take against her.

Appointments/Treatment: Rooted In Me Therapy may contact you about appointment reminders or treatment alternatives.

In all of the above stated circumstances, other than for treatment, Rooted In Me Therapy will release only the minimum amount of information necessary to accomplish the purpose of the use or disclosure.

Other:

In any other situation, Rooted In Me Therapy will request your written authorization before using or disclosing any of your identifiable health information. For instance, most uses and disclosures of psychotherapy notes (if recorded by therapist) and most uses and disclosures for marketing purposes, including subsidized treatment communications, will require your authorization. Additionally, most disclosures of PHI that constitute the sale of PHI will require your authorization. If you choose to sign such an authorization to disclose information, you can revoke that authorization at any time to stop future uses/disclosures.

IV. Your Rights Regarding Your Health Information

You have the following rights with respect to your protected health information:

1. You have the right to request in writing that your protected health information not be used or disclosed by Rooted In Me Therapy for treatment, payment or administrative purposes or by to persons involved in your care except when specifically authorized by you. Rooted In Me Therapy will consider the request but is not legally bound to agree to the restriction unless it pertains to disclosures to a client's health plan concerning an item or

service for which Rooted In Me Therapy has been paid out-of pocket in full. To the extent that she does agree with any restriction, she will put the agreement in writing and abide by it except in emergency situations. She cannot agree to limit uses/disclosures that are required by law.

2. You have the right to request that Rooted In Me Therapy contact or send you information at an alternative address or by an alternative means. She will agree to your request as long as it is reasonably easy for her to do so.

3. You have the right, within the limits of Missouri statutes, to inspect and copy your protected health information. Any such requests must be made in writing. Rooted In Me Therapy will respond in writing to such a request within 30 days. If you request copies, Rooted In Me Therapy may charge you a reasonable cost for copying.

4. You have the right to submit a request to amend your information if you believe that information in your record is incorrect or if important information is missing.

5. You have the right to receive an accounting of certain disclosures of your protected health information.

6. You have a right to receive this Notice in paper and/or in electronic format.

V. Rooted In Me Therapy Duties

1. Rooted In Me Therapy is required by law to maintain the privacy of protected health information and to provide individuals with notice of its legal duties and privacy practices with respect to protected health information.

2. Rooted In Me Therapy is required to abide by the terms of this Notice currently in effect, and

3. Rooted In Me Therapy reserves the right to change the terms of this Notice and make the new Notice provisions effective for all protected health information that she maintains. Should Rooted In Me Therapy make changes in its Notice, she will post the changed Notice in the office waiting area. You may request a copy of the Notice at any time.

VI. Complaint Procedure

If you are concerned that Rooted In Me Therapy has violated your privacy rights, please contact her. You have the right to file a complaint with her and/or with the Secretary of the Federal Department of Health and Human Services. Under no circumstances will any action be taken against you for filing a complaint.

BY SIGNING BELOW I AM AGREEING THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ITEMS CONTAINED IN THIS DOCUMENT.