



Notice of Privacy Practices

This notice explains how we may use and disclose your protected health information (PHI), your privacy rights, and who to contact if you have questions or wish to file a complaint. We may use and disclose your health information for treatment, payment, and health care operations as described in this notice. Certain records, including substance use disorder treatment records, may be subject to additional federal protections. Please review it carefully.

Our promise to you

I understand that health information about you and your health care is personal. I am committed to protecting health information about you. I create a record of the care and services you receive from me. I need this record to provide you with quality care and to comply with certain legal requirements. This notice applies to all of the records of your care generated by this mental health care practice. This notice will tell you about the ways in which I may use and disclose health information about you. I also describe your rights to the health information I keep about you, and describe certain obligations I have regarding the use and disclosure of your health information.

I am required by law to:

- Make sure that protected health information (“PHI”) that identifies you is kept private.
- Give you this notice of my legal duties and privacy practices with respect to health information.
- Follow the terms of the notice that is currently in effect.
- We may change the terms of this Notice. Any revised Notice will be posted on our website and provided in the client portal. You may request a printed copy at any time and we will provide one promptly.

How we may use and disclose PHI (common examples)

- **Treatment:** Sharing information with other health care providers involved in your care (e.g., medication providers).
- **Payment:** Sending claims to your insurer, or collecting payment.
- **Health care operations:** Practice management, quality improvement, or legal compliance.
- **Court Orders and Legal Proceedings:** Some disclosures may be required or permitted by law (for example; reporting abuse, imminent risk of harm, court orders, or public health reporting). Certain substance use disorder treatment records may require additional legal processes before disclosure, as required by federal law.
- **Public Health and Safety Activities:** We may disclose PHI when required by law for public health activities, reporting abuse or neglect, preventing serious threats to health or safety, or complying with health oversight agencies. Some types of records, including substance use disorder treatment records, may have additional restrictions.



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Special note — psychotherapy notes & sensitive data

Psychotherapy notes are treated with extra protection and generally require a separate written authorization for release. Certain substance-use, HIV/STD, and similar sensitive records may also need special authorization or have additional protections.

Special Protections for Substance Use Disorder Records

Some health information related to substance use disorder diagnosis, treatment, or referral for treatment may be protected by additional federal confidentiality laws (42 CFR Part 2).

Where applicable, we will obtain your written consent before using or disclosing substance use disorder treatment records for treatment, payment, and health care operations, unless an exception applies.

Once disclosed with your consent for these purposes, federal law may permit the recipient to further use or disclose the information as allowed under HIPAA.

You have the right to revoke your consent for these disclosures at any time, except to the extent that we have already acted in reliance on it.

Your rights regarding your PHI

You have the right to:

- See and get a copy of your records (in most cases).
- Request an amendment to your records.
- Request a restriction on certain uses/disclosures (we must honor a request if you paid out-of-pocket in full for a service). You may request restrictions on certain uses or disclosures of your health information. We are not required to agree to all requests. Special protections may apply to substance use disorder treatment records.
- Request an accounting of disclosures for the past 6 years (or shorter period permitted by law). You have the right to request a list of certain disclosures we have made of your health information. This includes certain disclosures of substance use disorder information as required by federal law.
- Obtain a paper copy of this Notice.
- To exercise a right above, contact our Privacy Officer (below). Requests will be processed using our standard forms.

Telehealth & electronic communications

We use a HIPAA-compliant video platform for telehealth. Electronic communications (email, text, video) carry some privacy risks; we limit text/email to scheduling and administrative matters unless we agree otherwise in writing.



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How to file a complaint

If you believe your privacy rights have been violated, you may file a complaint with our office or with the U.S. Department of Health and Human Services Office for Civil Rights. You will not be penalized for filing a complaint.

Complaints regarding substance use disorder confidentiality may also be subject to federal enforcement laws.

- Colorado Division of Professions & Occupations: 1560 Broadway, Suite 1350, Denver, CO 80202 — (303) 894-7800
- U.S. Dept. of Health & Human Services (Office for Civil Rights): www.hhs.gov/ocr

Privacy Officer / Contact

Grounded Light Counseling, LLC

Privacy Officer: Lisa Permar — privacy@groundedlightcounseling.com — 970-236-8932

Address: 2519 S. Shields St., Ste 1K-1063, Fort Collins, CO 80526

I acknowledge receipt of the Notice of Privacy Practices.

Client Printed Name

Client Signature

Effective Date