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Notice of Privacy Practices

This notice will tell you how I handle your child's medical information. It tells how I use this information here in this office, how I share it with other professionals and organizations, and how you can see it.

Each time your child visits my office or any doctor's office, hospital, clinic, or other health care provider, information is collected about your child's physical and mental health. It may be information about your child's past, present, or future health or conditions, or the tests and treatment your child got from me or from others, or about payment for health care. The information I collect from you is called "**PHI**," which stands for "**protected health information**." This information goes into your child's **medical or health care records** in my office.

In this office, your child's PHI is likely to include these kinds of information:

- Your child's history: Things that happened to your child in the past
- Reasons your child came for treatment: Problems, complaints, symptoms, or needs
- Diagnoses: These are the medical terms for your child's problems or symptoms
- A treatment plan: This is a list of treatments and other services that I think will best help
- Progress notes: Each time you come in, I write down some things about how your child is doing, what I notice about your child, and what you tell me.
- Records I get from others who treated your child or evaluated your child
- Psychological test scores, school records, and other reports
- Information about medications your child has taken
- Legal matters
- Billing and insurance information

I use PHI for many purposes. For example, I may use it:

- To plan your child's care and treatment
- To decide how well my treatments are working for your child
- When I talk with other health care professionals who are also treating your child, such as your family doctor or the professional who referred your child to me
- To show that your child actually received services from me, which I billed to you or to your health insurance company
- To improve the way I do my job by measuring the results of my work

Although your child's health care records in my office are my physical property, the information belongs to you. You can read the records, and if you want a copy I can make one for you (but I may charge you for the costs of copying and mailing, if you want it mailed to you). In some very rare situations, you cannot see all of what is in your child's records.

Privacy and the laws about privacy

I am required to tell you about privacy because of a federal law, the Health Insurance Portability and Accountability Act of 1996 (HIPAA). HIPAA requires me to keep your child's PHI private and to give you this notice about my legal duties and my privacy practices. I will obey the rules described in this notice. If I change my privacy practices, they will apply to all the PHI I keep.

How your protected health information can be used and shared

Except in some special circumstances, when I use your child's PHI in this office or disclose it to others, I share only the **minimum necessary** PHI needed for those other people to do their jobs. The law gives you rights to know about your child's PHI, to know how it is used, and to have a say in how it is shared.

Uses and disclosures with your consent

After you have read this notice, you will be asked to sign a separate **consent form** to allow me to use and share your child's PHI. I need information about your child to provide care. You have to agree to let me collect the information, use it, and share it to care for your child properly. Therefore, you must sign the consent form before I begin to treat your child. If you do not consent I cannot treat your child.

The basic uses and disclosure: For treatment, payment, and health care operations

For treatment. I use your child's medical information to provide your child with psychological treatments or services. These might include individual, family, or group therapy; psychological, educational, or vocational testing; treatment planning; or measuring the benefits of my services.

I may share your child's PHI with others who provide treatment to your child. I am likely to share the information with your child's pediatrician. If your child is being treated by a team, I can share some of your child's PHI with the team members, so that the services your child receives will work best together. The other professionals treating your child will also enter their findings, the actions they took, and their plans into your child's medical record, and so we all can decide what treatments work best for your child and make up a treatment plan. I may refer your child to other professionals or consultants for services I cannot provide. When I do this, I need to tell them things about your child. I will get back their findings and opinions, and those will go into your child's records here. If your child receives treatment in the future from other professionals, I can also share the PHI with them.

For payment. I may use your child's information to bill you, your insurance, or others, so I can be paid for the treatments I provide to your child. I may contact your insurance company to find out exactly what your insurance covers. I may have to tell them about your child's diagnoses, what treatments your child has received, and the changes I expect in your child's conditions. I will need to tell them about when we met, your child's progress, and other similar things.

For health care operations. Using or disclosing your child's PHI for health care operations goes beyond my care and your payment. For example, I may use PHI to see where I can make improvements in the care and services I provide. I may be required to supply some information to some government health agencies, so they can study disorders and treatment and make plans for services that are needed. If I do, your name and personal information will be removed from what I send.

Other uses and disclosures in health care

Appointment reminders. I may use and disclose your child's PHI to reschedule or remind you of appointments for treatment or other care. If you want me to call or write to you only at your home or your work, or you prefer some other way to reach you, I usually can arrange that.

Treatment alternatives. I may use and disclose your child's PHI to tell you about or recommend possible treatments or alternatives that may be of help to your child.

Business associates. I hire other businesses to do some jobs for me. In the law, they are called my "business associates." An example include a billing service to figure out, print, and mail my bills. These business associates need to receive some of your child's PHI to do their jobs properly. To protect your privacy, they have agreed in their contract with me to safeguard your information.

Uses and disclosures that require your authorization

If I want to use your information for any purpose besides those described above, I need your permission on an **authorization form**. I don't expect to need this very often. If you do allow me to use or disclose your child's PHI, you

can cancel that permission in writing at any time. I would then stop using or disclosing your information for that purpose. Of course, I cannot take back any information I have already disclosed or used with your permission.

Uses and disclosures that don't require your consent or authorization

The law lets me use/disclose some of your child's PHI without your consent or authorization in some cases. Here are some examples of when I might do this.

1. When required by law: There are some federal, state, or local laws that require me to disclose PHI. I have to report suspected child abuse. If you are involved in a lawsuit or legal proceeding, and I receive a subpoena, discovery request, or other lawful process, I may have to release some of your child's PHI. I will only do so after trying to tell you about the request, consulting your lawyer, or trying to get a court order to protect the information they requested. I have to disclose some information to the government agencies that check on me to see that I am obeying the privacy laws.
2. For law enforcement purposes - I may release medical information if asked to do so by a law enforcement official to investigate a crime.
3. For public health activities - I may disclose some of your child's PHI to agencies that investigate diseases or injuries.
4. Relating to decedents - I may disclose PHI to coroners, medical examiners, or funeral directors, and to organizations relating to organ, eye, or tissue donations or transplants.
5. To prevent a serious threat to health or safety - If I come to believe that there is a serious threat to your child's health or safety, or that of another person or the public, I can disclose some of your child's PHI. I will only do this to persons who can prevent the danger.

Uses and disclosures where you have an opportunity to object

I can share some information about your child with your family or close others. I will only share information with those involved in your child's care and anyone else you choose, such as close friends. I will ask you which persons you want me to tell, and what information you want me to tell them about your child's condition or treatment. You can tell me what you want, and I will honor your wishes as long as it is not against the law.

If it is an emergency, and I cannot ask if you disagree, I can share information if I believe that it is what you would have wanted and if I believe it will help you if I do share it. If I do share information, in an emergency, I will tell you as soon as I can. If you don't approve I will stop, as long as it is not against the law.

An accounting of disclosures I have made

When I disclose your child's PHI, I may keep some records of whom I sent it to, when I sent it, and what I sent. You may ask for a list at any time.

Summary: Your rights concerning your child's health information

1. You can ask me to communicate with you about your child's health and related issues in a particular way or at a certain place that is more private for you. For example, you can ask me to call you at home, and not at work, to schedule or cancel an appointment. I will try my best to do as you ask.
2. You have the right to ask me to limit what I tell people involved in your child's care or with payment for your child's care, such as family members and friends. I don't have to agree to your request, but if I do agree, I will honor it except when it is against the law, or in an emergency, or when the information is necessary to treat your child.
3. You have the right to look at the health information I have about your child, such as your child's medical and billing records. You can get a copy of these records, but I may charge you.

4. If you believe that the information in your child's records is incorrect or missing something important, you can ask me to make additions to your child's records to correct the situation. You have to make this request in writing. You must also tell me the reasons you want to make the changes.

5. You have the right to a copy of this notice. If I change this notice, I will post the new one in my office, and you can always get a copy for yourself.

6. You have the right to file a complaint if you believe your child's privacy rights have been violated. You can file a complaint with the Secretary of the U.S. Department of Health and Human Services. All complaints must be in writing. Filing a complaint will not change the health care I provide to you in any way. You may have other rights that are granted to you by the laws of my state, and these may be the same as or different from the rights described above. I will be happy to discuss these situations with you now or as they arise.

The effective date of this notice is May 1, 2014.