NOTICE OF PRIVACY POLICIES – LAUREN PENNER THERAPY, PLLC

THIS NOTICE OF PRIVACY PRACTICES EXPLAINS HOW YOUR HEALTH INFORMATION MAY BE USED. LAUREN PENNER THERAPY, PLLC IS REQUIRED TO FOLLOW THE POLICIES OUTLINED IN THIS AGREEMENT. PLEASE REVIEW THIS NOTICE CAREFULLY.

Your health record contains sensitive information known as personal health information (PHI) which includes therapy records and personal information about you. By law, and in accordance with the ethics of the American Counseling Association (ACA), Lauren Penner Therapy, PLLC is required to comply with the Standards for Privacy of Individually Identifiable Health Information ("Privacy Rule") according to the Health Insurance Portability Accountability Act (HIPAA). This practice is required by law to provide this notice of how PHI may be used and disclosed, as well as to inform you of your rights pertaining to your health information.

"Personal health information" includes but is not limited to:

- Dates, times, and length of your therapy sessions
- · Cancellations or no-shows to appointments
- Information disclosed over the phone or in session
- Information disclosed in text messages, by email, or at other times
- Your therapist's observations of you in sessions
- Assessments of your mental health concerns and mental status
- Results of psychological tests
- Your current and past diagnosis(es)
- Treatment plans and diagnostic information
- Past and current medication records
- Billing, payment, and insurance information
- Records obtained from other healthcare providers

How we may use and disclose your personal health information:

State and federal laws allow Lauren Penner Therapy, PLLC to use and disclose your health information to provide services. Providing treatment services, collecting payment and conducting health care duties are necessary activities for quality care.

Treatment: Your health information may be used for purposes of quality and continuity of care. Your therapist may provide your information to other providers such as medical provider, dietician, psychiatrist, inpatient/outpatient provider, or to other members of your treatment team with a signed Release of Information. Your therapist may also use clinically relevant details for purposes of case consultation and supervision for purposes of quality of care.

Payment: Your health information may be used and disclosed for purposes of obtaining payment for services provided to insurance providers or third-parties responsible for your payments. If a third-party is responsible for payment, your therapist may communicate with the cardholder on file. Your health insurance plan may use this information in order to determine eligibility for out-of-network benefits or qualification for medically necessary services. In the event that your delinquent balance is transferred to a collection agency or you dispute a charge, these entities may ask for parts of your personal health information which your therapist will provide. Signed financial agreements will be provided to banks, collection agencies, or other similar institutions if requested to resolve a payment issue.

Healthcare Operations: Your health information can be used and disclosed to run this practice, improve your care, contact you when necessary, and resolve any complaints you may have. Your information may also be used to review treatment procedures, review business activities, acquire certification, training, or compliance and licensing activities.

Other uses and disclosures of your personal health information: Lauren Penner Therapy, PLLC is allowed or required to disclose your information in other ways – usually in ways that contribute to the public good, such as public health and research. This practice has to meet conditions in the law before your information can be disclosed for these purposes, and disclosures will be made in a manner consistent with applicable laws. For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html.

We can disclose health information about you for certain situations such as: Public Health: Your therapist will take reasonable action to ensure bodily safety or for preventing disease and the spread of communicable illnesses.

Child abuse or neglect: Your therapist is a mandated reporter of suspected abuse, or neglect of a minor, and may use personal information in order to make a report to a government agency.

Elder abuse and neglect: Your therapist is a mandated reporter of suspected abuse and neglect of an elderly person, and may use personal information in order to make a report to a government agency.

Safety Precautions: Your therapist will take reasonable action toward preventing or reducing a serious threat to anyone's health or safety including emergency situations.

Conduct research: We can use or disclose your information for health research. (Lauren Penner Therapy, PLLC is not currently conducting research and will notify clients if this changes)

Comply with the law: We will disclose information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law, or to state licensing board for investigations of complaints.

Address workers' compensation, law enforcement, and other government requests: We can use or disclose health information about you:

- For workers' compensation claims
- 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

Court proceedings or legal action: We can disclose health information about you in response to a judicial or administrative order, or in response to a court-issued subpoena.

Law Enforcement: We can disclose limited information to assist law enforcement for safety purposes such as locating a missing person, or in the event that a crime occurs on the premises of this practice.

Your Choices: For certain health information, you can tell us your choices about what we disclose. If you have a clear preference for how this practice discloses your information in the situations described below, please inform Lauren Penner Therapy, PLLC of your request in writing.

Reasonable efforts will be made to follow your instructions. In these cases, you have both the right and choice to tell us to:

- Disclose information with your family, close friends, or others involved in your care
- Disclose information in a disaster relief situation

If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and disclose your information if we believe it is in your best interest. We may also disclose your information when needed to lessen a serious and imminent threat to health or safety.

Lauren Penner Therapy, PLLC will NEVER use personal health information or private treatment details for purposes of marketing. Your therapist may keep a record of psychotherapy notes, which include therapist's personal clinical impressions that are separate from your session charts and will not be shared as a part of your case file.

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

Right to request an electronic or paper copy of your personal health record:

• You can ask to view or obtain an electronic (when possible) or paper copy of your medical record and other health information we have about you. This request must be made in writing. Records will be maintained for 7 years past the last date of service in the case of an adult client. In the case of a child client, records will be maintained 5 years past the 18th birthday or 7 years (whichever is greater).

• We will provide a copy or a summary of your health information, usually within 15 days of your request. The practice may charge a reasonable, cost-based fee.

Right to ask us to correct your medical record:

• You can ask us to correct health information that you believe to be incorrect or incomplete. This request must be made to your provider in writing.

• We may decline to fulfill your records request with a written explanation within 15 days of request. If your request is denied you have the right to contest this in writing which will be kept in your record.

Right to request confidential communications:

• You can ask us to contact you for appointment reminders, issues regarding payment, and treatment issues in a specific way (for example, home or office phone) or to send mail to a different address.

• We will respond to all reasonable requests.

Right to ask for limits to disclosures:

• You can ask us not to use or disclose certain health information for treatment, payment, or our operations. We are not required to agree to your request, and we may say "no" if it would affect your care. This request must be in writing and specify what restrictions are needed.

• If you pay in full for a service out-of-pocket, you can ask us not to disclose that information for the purpose of payment or our operations with your health insurer. We will comply with the request unless legally required to disclose that information.

Right to a list of parties who were given disclosed information:

• You have the right to request a list of instances Lauren Penner Therapy, PLLC disclosed your health information for six (6) years prior to the date of the request, who we disclosed it with, and why.

• We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We'll provide one accounting a year at no charge but will charge a reasonable, cost-based fee if you request more than one (1) in a period of twelve (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. You will be provided with a paper copy within seventy-two (72) hours.

Choose someone to act for you:

• If you have appointed someone as your medical power of attorney or if someone is your legal guardian, that person may exercise your rights and make choices about your health information on your behalf.

• Documentation for your representative will be reviewed and releases not authorized without confirming there is legal standing to provide the information.

If you think that your rights have been violated you can complain by contacting: The Privacy Officer: Lauren Penner, LPC Phone: 432.788.1623 Email: lauren@laurenpennertherapy.com

Filing a complaint by mail: U.S. Department of Health and Human Services Office for Civil Rights 200 Independence Avenue, S.W., Washington, D.C. 20201 Phone: 1-877-696-6775 Visit: www.hhs.gov/ocr/privacy/hipaa/complaints/

Lauren Penner Therapy, PLLC will not retaliate against you for filing a complaint as it is your right to do so.

Responsibilities of Practice:

• We are required by law to maintain the privacy and security of your protected health information.

• We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.

• We must follow the duties and privacy practices described in this notice and give you a copy of it.

• We will not use or disclose your information other than as described here unless you supply written permission. You have the right to change your mind at any time and may provide notice in the case that you wish to rescind permission.

For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/ noticepp.html.

Changes to the Terms of this Notice: This practice can change the terms of this notice, and the changes will apply to all information we have about you. This notice will be available upon request.

Contact information for Lauren Penner Therapy, PLLC: Lauren Penner, Owner 1755 N. Collins Blvd, Suite #310 Richardson, TX 75080 Phone. 432.788.1623 Fax: 469.248.3635 Email: lauren@laurenpennertherapy.com