

Lakeshore Psychology Services LLC

NOTICE OF PRIVACY PRACTICES (NPP) - BRIEF VERSION (HIPAA FEDERAL REGULATIONS 4/14/03)

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Our commitment to your privacy

Our practice is dedicated to maintaining the privacy of your personal health information as part of providing professional care. We also are required by law to keep your information private. This pamphlet is a shorter version of the full, legally required NPP, a copy of which is available upon request.

Under the law, without specific written authorization from you, we are permitted to use and disclose your health care records for the purposes of **treatment, payment and health care operations**. If we or you want to use or disclose (send, share, release) your information for any other purposes we will discuss this with you and ask you to sign an **Authorization** form to allow this. Under federal law, we are permitted to communicate with you about your health and related issues in a particular way or at a certain place. For example, we may call you at home, text, or email and leave messages for you, unless you specifically ask us in writing not to, in which case we are permitted but not required to abide by your request. We may also tell people involved in your care or the payment for your care, (e.g., family members, insurance) that which we deem necessary or useful or that which is required, unless you specifically ask us in writing not to, in which case we are permitted but not required to abide by your request.

We will keep your health information private, but there are some times when the laws require us to use or share it. For example (see the long version for additional examples):

1. When there is a serious threat to your health and safety or the health and safety of another individual or the public. We will only share information with a person or organization who is able to help prevent or reduce the threat.
2. Some lawsuits and legal or court proceedings.
3. If a law enforcement official requires to do so.
4. For Workers Compensation and similar benefit programs.

You have the following rights:

1. With the exception of psychotherapy notes, you have the right to look at and copy your health information including your medical and billing records.
2. If you believe the information in your records is incorrect or missing important information, you can ask us to make some kinds of changes (called amending) to your health information. You have to make this request in writing and send it to our Privacy Officer. We'll need to know the reasons you want to make the changes.
3. To protect Psychotherapy Notes from insurance companies.
4. You have the right to a copy of the current NPP.
5. You have the right to file a complaint if you believe your privacy rights have been violated. You can file a complaint with our Privacy Officer and with the Secretary of the Department of Health and Human Services. All complaints must be in writing. Filing a complaint will not change the health care we provide to you in any way.

If you have any questions regarding this notice or our health information privacy policies, please contact our Privacy Officer, Dr. Lee Hildebrand, Ph.D. Treatment can be refused to those who are unwilling to abide by the terms of the NPP.