



Notice of Privacy Practices

Updated: 01/01/2018

As required by the Privacy Regulations created as a result of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), this notice describes how health information about your child (as a client at Beach Kids Therapy Center) may be used and disclosed and how you can get access to your protected health information (PHI).

Our commitment to your privacy

Beach Kids Therapy Center (BKTC) and all its employees are dedicated to maintaining the privacy of your child's protected health information (PHI). In conducting our business, we create a record of the care and services your child receives. We are required by law to maintain the confidentiality of health information that identifies your child and to provide you with this notice of our legal duties concerning your child's PHI. This notice applies to all of the records of your child's care that we maintain, whether created by our facility staff or your child's personal doctor. Your child's personal doctor may have different policies or notices regarding the doctor's use and disclosure of your child's health information created and/or maintained in the doctor's office.

We are required by law to provide you with the following information:

- How we may use and disclose your PHI
- Your privacy rights regarding your PHI
- Our legal duties to protect your health information
- Whom to contact for more information about our privacy policies

The terms of this notice apply to all records containing your child's PHI that are created or maintained by our practice. We reserve the right to revise or amend this Notice of Privacy Practices. Any revision or amendment to this notice will be effective for all of your child's records that our practice has created or maintained in the past, and for any of your child's records that we may create or maintain in the future. Our practice will post a copy of our current notice in our waiting areas and on our website at www.beachkidstherapy.com. You can receive a copy of the current notice at any time. The law requires Beach Kids Therapy Center to ask for written proof that you received the Notice of Privacy Practices or "Acknowledgement of Privacy Practices."

How we may use and disclose your protected health information

1. Treatment: BKTC Staff - including, but not limited to, our therapist and administrative staff - may use or disclose your child's PHI in order to treat your child or assist others in your child's treatment. For example, we may send health information about your child to a specialist as a part of the referral process. Also, we may send health information to other health care providers, including but not limited to your child's documented primary care physician, specialist or referring physician. Finally, we may disclose your PHI to your child's insurance company for pre-authorization of services and/or medical necessity determination.

2. Payment: BKTC may use and disclose your child's PHI in order to bill and collect payment for the services you may receive or have received from us. For example, we may contact your child's health insurer to certify that he/she is eligible for benefits (and for what range of benefits), and we may provide your child's insurer with details regarding treatment to determine if your child's insurer will cover, or pay for, treatment. We also may use and disclose your child's PHI to obtain payment from third parties that may be responsible for such costs.

- You have a right to request a restriction on certain disclosures to your child's health plan if the disclosure is only for carrying out payment or health care operations and the requested restriction is for services paid out-of-pocket.

3. Appointment Reminders: BKTC may use and disclose your PHI to contact you and remind you of an appointment.

4. Treatment Options: BKTC may use and disclose your PHI to inform you of potential treatment options or alternatives.

5. Release of Information to Family/Caregiver: BKTC may release your PHI to a friend, family member or caregiver that is involved in your child's care. For example, a parent or guardian may ask the nanny, aunt or babysitter to take a child to therapy. In this example, the nanny, aunt or babysitter may have access to the child's health information.

6. Disclosures Required by Law: BKTC will use and disclose your child's PHI when we are required to do so by federal, state or local law.

7. Health Care Operations: BKTC may use and disclose your PHI to operate our business. For example, BKTC may use your PHI to evaluate the quality of care your child received from us, or to conduct cost-management and business planning activities for our practice.

Other use and disclosure of your protected health information in certain special circumstances

1. **Public Health Risks:** BKTC may disclose your PHI to public health authorities that are authorized by law to collect information for the purpose of:

- Reporting child abuse or neglect
- Preventing or controlling disease, injury or disability
- Notifying a person regarding potential exposure to a communicable disease
- Notifying a person regarding a potential risk for spreading or contracting a disease or condition

2. **Lawsuits and similar proceedings:** Our practice may use and disclose your PHI in response to a court or administrative order, if you are involved in a lawsuit or similar proceeding. We also may disclose your PHI in response to a discovery request, subpoena, or other lawful process by another party involved in the dispute, but only if we have made an effort to inform you of the request or to obtain an order protecting the information the party has requested.

3. **Serious threat to health or safety:** BKTC may use and disclose your PHI when necessary to reduce or prevent a serious threat to your child's health and safety or the health and safety of another individual or the public. Under these circumstances, we will only make disclosures to a person or organization able to help prevent the threat.

In any other situation not covered by this notice, we will ask for your written authorization before using or disclosing protected health information about your child. Included, but not limited to:

- Use or disclosure of protected health information for marketing purposes
- Use or disclosure of protected health information to the school district

If you choose to authorize use or disclosure, you can later revoke that authorization by notifying us in writing of your decision. This will not apply to information already released or information related to treatment, payment, operations or disclosures required by law.

Your rights regarding your health information

You have the following rights regarding your PHI:

1. **Confidential Communication:** You have the right to request that BKTC communicate with you about your child's health and related issues in a particular manner. For example, you may request that we contact you at your home or at a specific cell phone number. In order to request a type of confidential communication, you must make a written request to [Privacy Officer, 970 Calle Amanecer, Ste A, San Clemente, CA 92673] specifying the requested method of contact, or the location you wish to be contacted. Reasonable requests will be accommodated without a explanation required for request.

2. **Requesting Restrictions:** You have the right to request a restriction in our use or disclosure of your child's PHI for treatment, payment or health care operations. Additionally, you have the right to request that we restrict our disclosure of your PHI to only certain individuals involved in your child's care or the payment for your child's care, such as family members and friends. We are not required to agree to your request; however, if we do agree, we are bound by our agreement except when otherwise required by law, in emergencies, or when the information is necessary to treat your child. You must request a restriction in our use or disclosure of your PHI in writing [Privacy Officer, 970 Calle Amanecer, Ste A, San Clemente, CA 92673]. Your request must include the information you wish restricted, whether you are requesting to limit BKTC's use, disclosure or both, and to whom you want the limits to apply.

3. **Inspection and Copies:** You have the right to inspect and obtain a copy of the PHI that may be used to make decisions about your child, including client health records and billing records. You just submit your request in writing to [Privacy Officer, 970 Calle Amanecer, Ste A, San Clemente, CA 92673] in order to inspect and/or obtain a copy of your PHI. BKTC may charge a fee for the costs of copying, mailing, labor and supplies associated with your request.

4. **Amendment:** If you believe that information in your child's record is incorrect or if important information is missing, you have the right to request that we amend the records by submitting a request in writing [Privacy Officer, 970 Calle Amanecer, Ste A, San Clemente, CA 92673] that provides your reason for requesting the amendment. We could deny your request to amend a record if the information was not created by us; if it is not part of the medical information maintained by us; or if we determine that record is accurate. You may appeal, in writing, a decision by us not to amend a record.

5. **Right to a Paper Copy of this Notice:** If this notice was sent to you electronically, you have the right to a paper copy of this notice and may request one at anytime.

6. **Right to Notification of Breach of Unsecured PHI:** BKTC is required to notify you if they become aware that your child's PHI has been breached.

7. **Right to File a Complaint:** If you believe your privacy rights have been violated, you may file a complaint with BKTC or with the U.S. Department of Health and Human Services Office of Civil Rights. All complaints must be submitted in writing. You will not be penalized for filing a complaint.