Praus Guidance & Healing, LLC

NOTICE OF PRIVACY PRACTICES

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

The effective date of this Notice is April 1, 2019. Revision Date of this Notice is December 23, 2019. Revision Date of this Notice is July 26, 2020. Revision Date of this Notice is June 7, 2021. Revision Date of this Notice is January 1, 2022.

Your health record contains personal information about you and your health. This information about you that may identify you and that relates to your past, present or future physical or mental health or condition and related health care services is referred to as Protected Health Information ("PHI"). This Notice of Privacy Practices describes how Praus Guidance & Healing, LLC may use and disclose your PHI in accordance with applicable law, including the Health Insurance Portability and Accountability Act ("HIPAA"), regulations promulgated under HIPAA including the HIPAA Privacy and Security Rules, and the Health Insurance Technology for Economic and Clinical Health (HITECH) Act. It also describes your rights regarding how you may gain access to and control your PHI.

Praus Guidance & Healing, LLC is required by law to maintain the privacy of PHI and to provide you with notice of Praus Guidance & Healing, LLC's legal duties and privacy practices with respect to PHI. Praus Guidance & Healing, LLC is required to abide by the terms of this Notice of Privacy Practices. Praus Guidance & Healing, LLC reserves the right to change the terms of the Notice of Privacy Practices at any time. Any new Notice of Privacy Practices will be effective for all PHI that Praus Guidance & Healing, LLC maintains at that time. Praus Guidance & Healing, LLC will provide you with a copy of the revised Notice of Privacy Practices by posting a copy on the website, sending a copy to you in the mail upon request or providing one to you at your next appointment.

Use and Disclosure of Protected Health Information for the Purposes of Providing Services

Providing treatment services, collecting payment and conducting healthcare operations are necessary activities for quality care. State and federal laws allow us to use and disclose your health information for these purposes.

How Praus Guidance & Healing, LLC May Use and Disclose Health Information About You:

For Treatment

Your PHI may be used and disclosed by those who are involved in your care for the purpose of providing, coordinating, or managing your health care treatment and related services. This includes consultation with clinical supervisors or other treatment team members. Praus Guidance & Healing, LLC may disclose PHI to any other consultant only with your authorization.

For Payment

Praus Guidance & Healing, LLC may use and disclose PHI so that payment can be received for the treatment services provided to you. This will only be done with your authorization. Examples of payment-related activities are: making a determination of eligibility or coverage for insurance benefits, processing claims with your insurance company, reviewing services provided to you to determine medical necessity, or undertaking utilization review activities. If it becomes necessary to use collection processes due to lack of payment for services, Praus Guidance & Healing, LLC will only disclose the minimum amount of PHI necessary for purposes of collection.

For Health Care Operations

Praus Guidance & Healing, LLC may use or disclose, as needed, your PHI in order to support the business activities including, but not limited to, quality assessment activities, employee review activities, licensing, and conducting or arranging for other business activities (e.g., billing or typing services) provided Praus Guidance & Healing, LLC has a written contract with the business that requires it to safeguard the privacy of your PHI. For training or teaching purposes PHI will be disclosed only with your authorization.

For Appointment Reminders

Praus Guidance & Healing, LLC may use and disclose medical information to contact and remind you about appointments. Reminders may be sent in the mail, by email, or by phone call or voicemail message. If you do not wish to get reminders, please let us know. If you are not home, we may leave this

information on your answering machine or in a message left with the person answering the phone.

For Sign In

Praus Guidance & Healing, LLC may use and disclose medical information about you by having you sign in when you arrive at our office. We may also call out your name when we are ready to see you.

Required by Law

Under the law, Praus Guidance & Healing, LLC must disclose your PHI to you upon your request. In addition, Praus Guidance & Healing, LLC must make disclosures to the Secretary of the Department of Health and Human Services for the purpose of investigating or determining our compliance with the requirements of the Privacy Rule.

Uses and Disclosures Without Authorization

It is the policy and practice of Praus Guidance & Healing, LLC to maintain the confidentiality of your Protected Health Information to the fullest extend allowed by applicable law. In some situations, however, the Protected Health Information we maintain for you may be used or disclosed by us without your authorization. Those situations include when the use or disclosure:

A. Generally, is required by federal, state or other applicable law even though you have not given your authorization;

- B. Is for certain public health purposes;
- C. Pertains to victims of abuse, neglect or domestic violence;
- D. Is related to civil, criminal, administrative or other health oversight activities;
- E. Occurs during the course of judicial or administrative proceedings;
- F. Is used for law enforcement purposes;
- G. Is for identification or location purposes;
- H. Is about deceased persons;
- I. Is for cadaveric organ, eye or tissue donation purposes;
- J. Is for research purposes;
- K. Is to avert a serious threat to health or safety;

L. Is for specialized government functions such as military operations, national security, corrections, medical suitability determinations or veterans' functions; M. Is for worker's compensation proceedings.

Uses and Disclosures With Authorization

Uses and disclosures not specifically permitted or required by applicable law will be made only with your written authorization, which may be revoked at any time, except to the extent that Praus Guidance & Healing, LLC has already made a use or disclosure based upon your authorization. The following uses and disclosures will be made only with your written authorization: (i) most uses and disclosures of psychotherapy notes which are separated from the rest of your medical record; (ii) most uses and disclosures of PHI for marketing purposes, including subsidized treatment communications; (iii) disclosures that constitute a sale of PHI; and (iv) other uses and disclosures not described in this Notice of Privacy Practices.

Your Rights Regarding Your PHI:

You have the following rights regarding PHI that Praus Guidance & Healing, LLC maintains about you. To exercise any of these rights, please submit your request in writing to Praus Guidance & Healing, LLC, 5123 W 9th St #1253, Minneapolis, MN 55437.

- **Right of Access to Inspect and Copy.** You have the right, which may be restricted only in exceptional circumstances, to inspect and copy PHI that is maintained in a "designated record set." A designated record set contains mental health/medical and billing records and any other records that are used to make decisions about your care. Your right to inspect and copy PHI will be restricted only in those situations where there is compelling evidence that access would cause serious harm to you or if the information is contained in separately maintained psychotherapy notes. Praus Guidance & Healing, LLC may charge a reasonable, cost-based fee for copies. If your records are maintained electronically, you may also request an electronic copy of your PHI. You may also request that a copy of your PHI be provided to another person.
- **Right to Amend.** If you feel that the PHI Praus Guidance & Healing, LLC has about you is incorrect or incomplete, you may ask Praus Guidance & Healing, LLC to amend the information although Praus Guidance & Healing, LLC is not required to agree to the amendment. If Praus Guidance & Healing, LLC denies your request for amendment, you have the right to file a statement of disagreement with Praus Guidance & Healing, LLC. Praus Guidance & Healing, LLC may prepare a rebuttal to

your statement and will provide you with a copy. Please contact Praus Guidance & Healing, LLC if you have any questions.

- **Right to an Accounting of Disclosures.** You have the right to request an accounting of certain of the disclosures that Praus Guidance & Healing, LLC makes of your PHI. Praus Guidance & Healing, LLC may charge you a reasonable fee if you request more than one accounting in any 12 month period.
- Right to Request Restrictions. You have the right to request a restriction or limitation on the use or disclosure of your PHI for treatment, payment, or health care operations. Praus Guidance & Healing, LLC is not required to agree to your request unless the request is to restrict disclosure of PHI to a health plan for purposes of carrying out payment or health care operations, and the PHI pertains to a health care item or service that your paid for out of pocket. In that case, Praus Guidance & Healing, LLC is required to honor your request for a restriction.
- **Right to Request Confidential Communication.** You have the right to request that Praus Guidance & Healing, LLC communicate with you about health matters in a certain way or at a certain location. Praus Guidance & Healing, LLC will accommodate reasonable requests. Praus Guidance & Healing, LLC may require information regarding how payment will be handled or specification of an alternative address or other method of contact as a condition for accommodating your request. Praus Guidance & Healing, LLC will not ask you for an explanation of why you are making the request.
- **Breach Notification.** If there is a breach of unsecured PHI concerning you, Praus Guidance & Healing, LLC may be required to notify you of this breach, including what happened and what you can do to protect yourself.
- **Right to a Copy of this Notice.** You have a right to a copy of this notice.

NOTICE REGARDING USE OF TECHNOLOGY

Praus Guidance & Healing, LLC may use electronic software, services, and equipment, including without limitation email, video conferencing technology, cloud storage and servers, internet communication, cellular network, voicemail, facsimile, electronic health record, and related technology ("Technology") to

share PHI with you or third-parties subject to the rights and restrictions contained herein. In any event, certain unencrypted storage, forwarding, communications and transfers may not be confidential. Praus Guidance & Healing, LLC will take measures to safeguard the data transmitted, as well as ensure its integrity against intentional or unintentional breach or corruption. However, in very rare circumstances security protocols could fail, causing a breach of privacy or PHI.

Complaints

If you believe that Praus Guidance & Healing, LLC has violated your privacy rights, you have the right to file a complaint in writing to our Privacy Officer at 5123 W 98th St #1253, Minneapolis, MN 55437 or with the Secretary of Health and Human Services at 200 Independent Avenue, S.W. Washington, D.C 20201 or by calling (202) 619-0257. Praus Guidance & Healing, LLC will not retaliate against you for filing a complaint.

Contacts

If you have questions or need further information, you may contact the Privacy Officer of Praus Guidance & Healing, LLC, 5123 W 98th St #1253, Minneapolis, MN 55437. The telephone number is (507) 668-1200

*You can access a copy of this Notice in your TheraPlatform account.

BY SIGNING THIS NOTICE, I ACKNOWLEDGE THAT PRAUS GUIDANCE & HEALING, LLC HAS PROVIDED ME WIITH A COPY OF ITS NOTICE OF PRIVACY PRACTICES THAT DESCRIBES HOW MEDICAL/MENTAL HEALTH INFORMATION ABOUT ME MAY BE USED AND DISCLOSED AND HOW I CAN GET ACCESS TO THIS INFORMATION.