I. Uses and Disclosures of Protected Health Information

We may use and disclose your PHI under the following circumstances:

1. Permitted Uses and Disclosures

- Treatment: Your information may be shared with healthcare providers involved in your care to coordinate and manage treatment.
- Payment: We may use and disclose PHI to obtain payment from insurance providers or other third parties for services rendered.
- Healthcare Operations: PHI may be used for quality assessment, staff training, accreditation, and other operational purposes to improve our services.
- Legal and Regulatory Compliance: We may disclose PHI as required by federal, state, or local laws, including responding to court orders, law enforcement requests, or audits.
- Public Health and Safety: PHI may be shared to prevent or control disease,
 report abuse or neglect, or avert serious threats to health and safety.
- Appointment Reminders and Health-Related Communications: We may contact you with appointment reminders or information about treatment alternatives and health-related benefits.

2. Uses and Disclosures Requiring Authorization

We will <u>not</u> use or disclose your PHI for the following purposes without your written authorization:

- Marketing or promotional activities
- Sale of PHI
- Fundraising communications

You may revoke your authorization at any time in writing, except where disclosure has already occurred based on prior authorization.

II. Your Rights Regarding Protected Health Information

You have the following rights under HIPAA regarding your PHI:

- Right to Access and Obtain Copies: You may request access to your health records and obtain copies for your personal use.
- Right to Request Amendments: If you believe your PHI is incorrect or incomplete, you may request corrections.
- Right to Confidential Communications: You may request that we communicate
 with you in a specific manner (e.g., by mail or phone at a designated address or
 number).
- Right to Restrict Disclosures: You may request limitations on the use or sharing of your PHI, though we may not be legally required to agree to all restrictions.
- Right to an Accounting of Disclosures: You may request a list of instances where your PHI has been shared, except for disclosures made for treatment, payment, or healthcare operations.
- Right to File a Complaint: If you believe your privacy rights have been violated, you may file a complaint with our office or with the U.S. Department of Health and Human Services (HHS) without fear of retaliation.

III. Security and Protection of Your Information

Resolutions implements comprehensive security measures to protect your PHI, including:

- Physical Safeguards: Secure storage of paper records in locked facilities.
- Technical Safeguards: Encrypted electronic records and secure access controls.
- Administrative Safeguards: Employee training, confidentiality agreements, and strict adherence to HIPAA regulations.

IV. Changes to This Notice

We reserve the right to modify this Notice of Privacy Practices at any time. Any revisions will apply to all PHI maintained by Resolutions and will be made available on our website or upon request.

V. Contact Information

For questions regarding this notice, to exercise your rights, or to file a complaint, please contact:

Resolutions 491 Heritage Drive, 2nd Floor, Jerome, ID, 83338 (208)654-0134 resolutionstherapyplus@restprc.com

We are dedicated to protecting your privacy and ensuring the confidentiality of your personal health information.