

Sound Families Pediatric Therapy

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Notice of Privacy Practices

This notice is effective in its entirety as revised December, 2023

This notice describes how medical information about your child may be used and disclosed, and how you can get access to this information. Please review it carefully.

If you have any questions about this notice, please contact our Contract Administrator at 206-395-6585.

Sound Families Pediatric Therapy respects your privacy. We understand that your child and family's personal health information is very sensitive. We will not disclose your information to others unless you tell us to do so, or unless the law authorizes or requires us to do so.

The law protects the privacy of the health information we create and obtain in providing our care and services to you and your child. For example, your child's protected health information includes symptoms, test results, diagnoses, treatment, health information from other providers, and billing and payment information relating to these services. Federal and state law allows us to use and disclose your child's protected health information for purposes of treatment and health care operations. State law requires us to get your authorization to disclose this information for payment purposes.

How We Use Your Patient Health Information

Examples of Use and Disclosures of Protected Health Information for Treatment, Payment, and Health Operations

For treatment:

- Information obtained by a member of our health care team will be recorded in your child's medical record and used to help decide what care may be right for your child.
- We may also provide information to others providing your child's care. This will help them stay informed.

For payment:

- We request payment from your health insurance plan and other third-party payors. Health plans and other payors need information from us about your child's healthcare treatment at Sound Families Pediatric Therapy. Information provided to health plans and other third-party payors may include your child's diagnoses, progress, goals or recommended care.

For Health Care Operations:

- We use your child's medical records to assess quality and improve services.
- We may use and disclose medical records to review the qualifications and performance of our health care providers and to train our staff.
- We may contact you to remind you about appointments and give you information about treatment alternatives or other health-related benefits and services.
- We may use and disclose your child's information to conduct or arrange for services, including:
 - medical quality review by your health plan;
 - accounting, legal, risk management, and insurance services;
 - audit functions, including fraud and abuse detection and compliance programs.

For Business Associates:

- We may disclose your personal information to our Business Associates, which are entities or individuals that are not employed by us that perform health care operations or payment activities on our behalf, which requires the collection, use or disclosure of your personal information. We must have contracts with our business associates that require them to maintain the confidentiality of your personal information.

Your Child's Health Information Rights

You have the following rights regarding health information we have about your child:

Right to Inspect and Copy:

- You have a right to inspect and copy health information that may be used to make decisions about your child's care or payment for your child's care. This includes medical and billing records, other than psychotherapy notes. To inspect a copy of this health information, you must make your request in writing to our Contract Administrator.

Right to Amend:

- If you feel that the health information we have is inaccurate or misleading, you may ask us to amend the information. You have the right to request an amendment for as long as the information is kept by or for Sound Families Pediatric Therapy. To request an amendment, you must make your request in writing to our Contract Administrator. While we accept requests for amendment, we are not required to agree to the amendment.

Right to an Accounting of Disclosures:

- You have the right to request a list of certain disclosures and a record of access regarding your child's health information. The list does not include disclosures we made directly to you, disclosures to friends/family members, disclosures you specifically authorized in writing, disclosures to third party payers or disclosures related to our daily business operations. To request an accounting of disclosures, you must make your request in writing to our Contract Administrator.

Right to Request Restrictions:

- You have the right to request a restriction or limitation on the health information we use or disclose. To request a restriction, you must make your request in writing to our Contract Administrator. We are not required to agree to your request. If we agree, we will comply with your request unless the information is needed to provide your child with emergency treatment.

Right to Request Confidential Communication:

- You have the right to request that we communicate with you in a certain way. Sound Families Pediatric Therapy may contact you by using text messaging, voice messaging, or email unless you request in writing that one of these modes of communication not be used. For example, you can ask that we contact you only by mail or at work. Please contact our Contract Administrator to request confidential communication. Your request must specify how or where you wish to be contacted. We will accommodate reasonable requests.

Right to a Paper Copy of this Notice:

- You have the right to a paper copy of this notice. You may ask us to give you a copy of this notice at any time. Even if you have received this notice electronically, you are still entitled to a paper copy of this notice.

Our Responsibilities

We are required to: keep your child's protected health information private; give you this Notice; follow the terms of this Notice.

We have the right to change our practices regarding the protected health information we maintain. If we make changes, we will update this Notice and all patients will receive a copy of the revised Notice.

To Ask for Help or Complain

If you have questions, want more information, or want to report a problem about the handling of your protected health information, you may contact us at 206-395-6585.

If you believe your privacy rights have been violated, you may file a complaint with Sound Families Pediatric Therapy or the Department of Health and Human Services. All complaints must be submitted in writing. You will not be penalized or discriminated against for filing a complaint.

Other Disclosures and Uses of Protected Health Information

We may use and disclose your protected health information without your authorization, as allowed or required by law, as follows: With Medical Researchers; To Funeral Directors/ Coroners; To Organ Procurement Organizations (tissue donation and transplant); To the Food and Drug Administration (FDA); To Comply With Workers' Compensation Laws; For Public Health and Safety Purposes as Allowed or Required by Law.; To Report Suspected Abuse or Neglect; For Law Enforcement Purposes; For Health and Safety Oversight Activities; For Disaster Relief Purposes; For Work-Related Conditions That Could Affect Employee Health; To the Military Authorities of U.S. and Foreign Military Personnel; In the Course of Judicial/ Administrative Proceedings; For Specialized Government Functions.

Other Uses and Disclosures of Protected Health Information

All other uses and disclosures will be made ONLY with your written authorization, which you have the right to revoke in most cases.

Changes to This Notice

We reserve the right to change the privacy practices in this notice and the right to make these changes for both your existing and future patient health information. If we change our privacy practices, all patients will receive a copy of the revised Notice.