



Notice of Privacy Practices

EFFECTIVE DATE OF THIS NOTICE This notice went into effect on 8/01/2026.

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

OUR LEGAL DUTY

We are required by federal and state law to:

- Maintain the privacy and security of your Protected Health Information (PHI)
- Provide you with this Notice of our legal duties and privacy practices
- Follow the terms of this Notice currently in effect
- Notify you if a breach of unsecured PHI occurs

We reserve the right to revise this Notice at any time. Any revised Notice will apply to all information we maintain and will be available on the website.

HOW WE MAY USE AND DISCLOSE YOUR INFORMATION

We may use and disclose your PHI without your written authorization for the following purposes:

1. Treatment

We may use your information to provide, coordinate, or manage your healthcare. Examples include:

- Consulting with other healthcare providers
- Referring you for psychiatric or other medical services.
- Coordinating with your primary care provider
- Clinical supervision and consultation

2. Payment

Because we accept commercial insurance, we may use and disclose your information to obtain payment for services. This may include:

- Submitting claims
- Providing diagnosis & procedure codes
- Supplying information required for medical necessity review
- Responding to audits or utilization review
- Prior authorization requests
- Payers may request limited clinical documentation as permitted by law.

3. Healthcare Operations

We may use and disclose information for operational purposes such as:

- Quality improvement
- Peer review
- Training and supervision
- Licensing and accreditation activities
- Business administrative services
- Legal compliance

ADDITIONAL PERMITTED DISCLOSURES

We may disclose information without your authorization when required or permitted by law, including:

- Mandatory reporting of abuse or neglect
- Public health reporting
- Health oversight activities
- Court orders and subpoenas
- To prevent a serious threat to health or safety
- Workers' compensation claims

SPECIAL PROTECTIONS FOR PSYCHOTHERAPY NOTES

Psychotherapy notes are maintained separately from the rest of your medical record.

We will not use or disclose psychotherapy notes without your written authorization except as permitted under HIPAA, including for supervision, legal defense, or when required by law.

SPECIAL PROTECTIONS FOR SUBSTANCE USE DISORDER RECORDS

(42 CFR Part 2)

“Use and Disclosure of Substance Use Disorder Records Subject to 42 CFR Part 2: If applicable, your substance use disorder (“SUD”) records are protected by federal law under 42 C.F.R. Part 2 (“Part 2”). This law provides extra confidentiality protections and requires a separate patient consent for the use and disclosure of SUD counseling notes. Each disclosure made with patient consent must include a copy of the consent or a clear explanation of the scope of the consent. It must also be accompanied by a written notice containing the language in 42 CFR Part 2.32(a). Disclosure of these records requires your explicit written consent, except in limited circumstances such as:

- *Medical Emergencies:* to the extent necessary to treat you
- *Reporting Crimes on Program Premises*
- *Child Abuse Reporting:* In connection with incidents of suspected child abuse or neglect to appropriate state or local authorities

Prohibitions on Use and Disclosure of Part 2 Records: SUD records received from programs subject to Part 2, or testimony relaying the content of such records, shall not be used or disclosed in civil, criminal, administrative, or legislative proceedings against you unless based on your written consent, or a court order after notice and an opportunity to be heard is provided to you or the holder of the record, as provided in Part 2. A court order authorizing use or disclosure must be accompanied by a subpoena or other legal requirement compelling disclosure before the requested SUD record is used or disclosed. If SUD records are disclosed to us or our business associates pursuant to your written consent for treatment, payment, and healthcare operations, we or our business associates may further use and disclose such health information without your written consent to the extent that the HIPAA regulations permit such uses and disclosures, consistent with the other provisions in this Notice regarding PHI.”

MICHIGAN STATE LAW PROTECTIONS

Michigan law may provide additional protections for:

- Mental health treatment records under the Michigan Mental Health Code
- HIV/AIDS-related information
- Genetic testing information
- Certain communicable disease records

When Michigan law provides greater privacy protection than federal law, we follow Michigan law.

TELEHEALTH PRIVACY

We may provide services via telehealth, including secure video platforms and, when clinically appropriate, telephone services. We use HIPAA-compliant technology vendors when required and maintain appropriate safeguards to protect your information. However, telehealth involves inherent risks, including:

- Unauthorized access to electronic transmissions
- Internet connectivity failures
- Technology disruptions
- Privacy risks if sessions occur in non-private environments. You are responsible for participating in telehealth sessions from a private location.

Telehealth services are documented in your medical record in the same manner as in-person services. Electronic data generated through telehealth platforms may be stored as part of your designated record set when clinically relevant.

SUPERVISORY REVIEW AND CONSULTATION

As a behavioral health practice, your clinician may practice under supervision as permitted by Michigan law and payer requirements. Your case may be reviewed for:

- Clinical supervision
- Consultation
- Quality assurance
- Documentation compliance
- Training purposes

Supervisors and consulting clinicians are bound by the same confidentiality laws described in this Notice. Supervisory review is considered a healthcare operation under HIPAA and does not require separate authorization. If services are billed under supervisory requirements (including certain Medicaid or Medicare arrangements), limited necessary information may be shared with supervising clinicians to comply with regulatory requirements.

ELECTRONIC COMMUNICATION AND SECURITY RISKS

We may communicate with you electronically, including through:

- Secure client portals
- Encrypted email (when available)
- Text messaging for scheduling
- Electronic billing systems

While we implement safeguards such as encryption and secure servers, no system can guarantee absolute security. Risks may include:

- Interception by unauthorized parties
- Mis-delivery of messages
- Device loss or theft
- Third-party access to shared devices

By providing your contact information, you acknowledge these risks.

Text messaging and standard email should not be used for emergencies or urgent clinical matters.

YOUR RIGHTS:

1. Inspect and Copy Your Records - *You may request access to your health information. A reasonable cost-based fee may apply as permitted by law.*
2. Request an Amendment - *You may request correction of information you believe is inaccurate or incomplete.*
3. Request an Accounting of Disclosures - *You may request a list of certain disclosures made outside of treatment, payment, or operations.*
4. Request Restrictions - *You may request limits on how we use or disclose your information. We are not required to agree to all restrictions. If you pay out-of-pocket in full for a service, you may request that we not disclose that information to your health plan.*
5. Request Confidential Communications - *You may request that we contact you in a specific way or at a specific location.*
6. Receive a Copy of This Notice - *You may request a paper copy at any time.*
7. File a Complaint - *You may file a complaint without fear of retaliation, online at: <https://www.michigan.gov/lara/bureau-list/bpl/complaint>*

USES AND DISCLOSURES REQUIRING AUTHORIZATION

We will obtain your written authorization for:

- Most disclosures of psychotherapy notes
- Most disclosures of substance use disorder
- Marketing communications (when required)
- Sale of PHI
- Any use not otherwise described in this Notice
- You may revoke authorization in writing at any time.

MINORS AND PARENTAL RIGHTS (MICHIGAN)

Under Michigan law, minors may consent to certain mental health services. In those situations, parental access to records may be limited as permitted by law.