

NOTICE OF PRIVACY PRACTICES

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.

I. PLEDGE REGARDING HEALTH INFORMATION:

Urban Speech & Occupational Therapy understands that health care information about your child is personal and is committed to protecting this sensitive information.

This notice applies to all records of your child's care generated by this practice. This notice will tell you about the ways in which we may use and disclose health information about your child. We also describe your rights and certain obligations we have regarding the use and disclosure of your child's information. Urban Speech & Occupational Therapy is required by law to:

- Make sure protected health information ("PHI") that identifies you or your child is kept private.
- Give you this notice of our legal duties and privacy practices with respect to health information.
- Follow the terms of the notice that is currently in effect.
- Notify you if we change the terms of this Notice and such changes apply to information we have regarding your child. The new Notice will be available upon request, in our office, and on our website.
- Notify you if a breach occurs that compromises the privacy of your child's PHI.

II. HOW WE MAY USE AND DISCLOSE HEALTH INFORMATION ABOUT YOUR CHILD:

We may use your child's health information for Treatment. Example: Federal privacy regulations allow health care providers who have a direct treatment relationship with the patient to use or disclose the patient's PHI without the patient's written authorization for consultations or referrals. We will make every attempt to get your written authorization prior to releasing any information in this circumstance.

We may use your child's health information for Payment. Example: We may disclose PHI to submit bills or claims to insurance companies.

We may use your child's health information for Health Care Operations. Example: We may use PHI for quality assurance activities to continually improve the effectiveness of the services we provide.

III. CERTAIN USES AND DISCLOSURES DO NOT REQUIRE YOUR AUTHORIZATION:

Subject to certain limitations in the law, Urban Speech & Occupational Therapy can use and disclose your child's PHI without your Authorization for the following reasons:

1. When disclosure is required by state or federal law, and the use or disclosure complies with and is limited to the relevant requirements of such law.
2. For public health activities, including reporting suspected child, elder, or dependent adult abuse, or preventing or reducing a serious threat to anyone's health or safety.
3. For health oversight activities, including audits and investigations.
4. For judicial and administrative proceedings, including responding to a court or administrative order. If you are involved in a lawsuit, Urban Speech & Occupational Therapy may disclose health information in response to a court or administrative order.
5. For law enforcement purposes, including reporting crimes occurring on the USOT premises.
6. For research purposes, including studying and comparing the patients who received one form of care versus those who received another form of care for the same condition.
7. For specialized government functions, including conducting intelligence operations.
8. For workers' compensation purposes, including complying with workers' compensation laws.
9. Appointment reminders and health related benefits or services. We may use and disclose your PHI to contact you to remind you that you have an appointment with us.
10. Disclosures to family, friends, or others – USOT may provide your PHI to a family member, friend, or other person that you indicate is involved in your child's care, unless you object in whole or in part. The opportunity to consent may be obtained retroactively in emergency situations.
11. Session Notes: USOT does keep "session notes" and any use or disclosure of such notes requires your Authorization unless the use or disclosure is:
 - i. For our use in treating your child.
 - ii. For our use in training or supervising associates to help them improve their clinical skills.
 - iii. For our use in defending Urban Speech & Occupational Therapy in legal proceedings instituted by you.
 - iv. For use by the Secretary of Health and Human Services to investigate our compliance with HIPAA.
 - v. Required by law and the use or disclosure is limited to the requirements of such law.

vi. Required by law for certain health oversight activities pertaining to the originator of the session notes.

vii. Required to help avert a serious threat to the health and safety of others.

Please note: Any uses or disclosures not described above will be made only with your written Authorization. We will make every effort to obtain written Authorization before disclosing PHI in any of the above circumstances. You may revoke written Authorizations at any time

IV. YOU HAVE THE FOLLOWING RIGHTS WITH RESPECT TO YOUR PHI:

1. The Right to Request Limits on Uses and Disclosures of Your PHI - You have the right to ask us not to use or disclose certain PHI for treatment, payment, or health care operations purposes.

2. The Right to Choose How We Send PHI to You - You have the right to ask USOT to contact you in a specific way or to send mail to a different address, and we will agree to all reasonable requests.

3. The Right to See and Get Copies of Your Child's PHI - You have the right to get an electronic or paper copy of your child's medical record and other information that we may have about your child. We will provide you with a copy of your child's record within 30 days of receiving your written request.

4. The Right to Get a List of the Disclosures We Have Made - You have the right to request a list of instances in which we have disclosed your child's PHI. USOT will respond to your request within 60 days of receiving your request. The list will include disclosures made in the last six years unless you request a shorter time.

5. The Right to Amend Your Child's PHI - If you believe that there is a mistake in your child's PHI, or that a piece of important information is missing from your child's PHI, you have the right to request that we correct the existing information or add the missing information. We may say "no" to your request, but we will tell you why in writing within 60 days of receiving your request.

6. The Right to Get a Paper or Electronic Copy of this Notice. You have the right to get a paper copy of this notice, and you have the right to get a copy of this notice by e-mail.

7. The Right to Complain – You have the right to file written complaints with our office, or with the Department of Health and Human Services, Office of Civil Rights, about violations of the provisions of this notice. We will not retaliate against you for filing a complaint.

EFFECTIVE DATE OF THIS NOTICE

This notice went into effect on 09/25/2025

