THE OBSIDIAN MILK COLLECTIVE

Email: info@theobsidianmilkcollective.org **Website:** www.theobsidianmilkcollective.org

Phone: 256-800-MILK (256-800-6455)

Notice of Privacy Practices

Effective Date: July 1, 2026

This Notice applies to all Protected Health Information maintained by The Obsidian Milk Collective on or after the Effective Date unless superseded by a revised Notice.

I. Our Commitment to Your Privacy

The Obsidian Milk Collective ("OMC") understands that your health information is personal and confidential. We are committed to protecting your Protected Health Information ("PHI") in accordance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and other applicable federal and state laws.

We create and maintain records of the care and services you receive in order to provide quality lactation support and to comply with legal and professional requirements.

By law, OMC is required to:

- Maintain the privacy and security of your Protected Health Information.
- Provide you with this Notice of Privacy Practices.
- Follow the terms of this Notice currently in effect.

OMC reserves the right to revise this Notice at any time. Any revised Notice will apply to all Protected Health Information maintained by OMC and will be made available upon request and through our website.

II. How We May Use and Disclose Your Health Information

1. Treatment

We may use and disclose your Protected Health Information to provide lactation consultation and support services.

This may include:

- Reviewing relevant pregnancy, birth, postpartum, parent, and infant health information.
- Coordinating care with other healthcare professionals involved in your or your infant's care.
- Making referrals to physicians, pediatricians, midwives, therapists, or other qualified healthcare providers.
- Reviewing photographs or videos voluntarily submitted by clients for clinical assessment.

We may disclose relevant information to another healthcare provider for coordination of care without your written authorization when permitted by law.

---

2. Payment

OMC may use your Protected Health Information as necessary to obtain payment for services provided.

Depending on the service received, payment may be made by the client, through a community partnership, grant funding, or another approved funding source.

OMC currently does not submit insurance claims directly. Payment responsibility, community-funded services, or other funding sources will be communicated prior to services.

---

3. Healthcare Operations

We may use your Protected Health Information for healthcare operations, including:

- Quality improvement
- Administrative activities
- Compliance reviews

- Staff education and training

Whenever possible, information used for education or quality improvement purposes will be de-identified.

---

4. Electronic Communication & Telehealth

OMC communicates with clients through the secure client portal, telephone, the MILK Line, email, and text messaging for scheduling, appointment reminders, care coordination, and follow-up support. By providing your mobile phone number, you consent to receive text messages from OMC related to your care, appointments, and other practice communications. Message and data rates may apply. You may opt out of non-essential text messages at any time by notifying OMC or reply STOP when applicable. Clients should be aware that while reasonable safeguards are used, electronic communication carries inherent privacy risks.

Clients should avoid sending urgent medical concerns through text message or the client portal. If you believe you or your infant are experiencing a medical emergency, call 911 or seek immediate medical care.

---

5. Required by Law

We may disclose your Protected Health Information when required by federal or state law.

---

6. Public Health & Safety

We may disclose your Protected Health Information when necessary to:

- Report suspected abuse or neglect.
- Prevent or reduce a serious threat to health or safety.
- Comply with public health reporting requirements.

---

7. Judicial & Administrative Proceedings

We may disclose Protected Health Information in response to court orders, subpoenas, or other lawful legal processes as required by law.

---

8. Appointment Reminders & Service Information

We may contact you to:

- Remind you of upcoming appointments.
- Provide information about services available through The Obsidian Milk Collective.
- Communicate important practice updates.

Appointment reminders may be sent by email, text message, telephone, or through the client portal based on your communication preferences.

III. Uses and Disclosures That Require Your Authorization

Uses or disclosures of your Protected Health Information that are not otherwise described in this Notice will require your written authorization.

You may revoke your authorization at any time by providing written notice, except to the extent that action has already been taken based on your authorization.

OMC does not sell your Protected Health Information and does not use your information for marketing purposes without your authorization.

IV. Your Rights Regarding Your Protected Health Information

You have the following rights regarding your Protected Health Information.

1. Right to Access

You have the right to request a copy of your medical record.

OMC will respond to your written request within 30 days, as required by law. A reasonable fee may apply for copies.

---

2. Right to Request Amendments

If you believe your health information is incorrect or incomplete, you may request an amendment in writing.

If your request is denied, you will receive a written explanation within the timeframe required by law.

---

3. Right to Request Restrictions

You may request restrictions on certain uses or disclosures of your Protected Health Information.

While we will carefully consider all requests, we are not required to agree to every requested restriction.

---

4. Right to Confidential Communications

You may request that we communicate with you using a specific method or at a specific location.

Reasonable requests will be accommodated whenever possible.

---

5. Right to an Accounting of Disclosures

You have the right to request a list of certain disclosures of your Protected Health Information made during the previous six years, excluding disclosures related to treatment, payment, or healthcare operations.

---

6. Right to a Copy of This Notice

You have the right to receive a paper or electronic copy of this Notice at any time, even if you previously agreed to receive it electronically.

V. Questions or Complaints

If you have questions about this Notice or believe your privacy rights have been violated, you may contact:

The Obsidian Milk Collective

Email: info@theobsidianmilkcollective.org

You may also file a complaint with the **U.S. Department of Health and Human Services, Office for Civil Rights.**

You will not be retaliated against for filing a complaint.