

**Over the Rainbow Speech-Language
Pathology and Related Services, LLC**



Privacy Policy

Effective Date: 09/30/2025

At Over the Rainbow Speech-Language Pathology and Related Services, LLC, we are committed to protecting the privacy and confidentiality of your personal health information in accordance with the Health Insurance Portability and Accountability Act (HIPAA) and other applicable privacy laws. This Privacy Policy explains how your information is collected, used, and protected in the course of providing speech-language pathology services.

1. Information We Collect

We may collect the following information as part of your care:

- Full name and date of birth
 - Contact information (phone number, email, address)
 - Medical history relevant to speech-language pathology
 - Referring physician information
 - Insurance and billing details
 - Appointment records and session notes
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2. Use of Personal Information

We use your information solely for the purposes of providing and coordinating care. This includes:

- Scheduling and confirming appointments
- Conducting evaluations and therapy sessions
- Creating and maintaining treatment records
- Communicating with you or your authorized representatives

- Coordinating care with your referring physician or other healthcare providers, as necessary and appropriate
- Processing insurance claims and payments
- Complying with legal and regulatory requirements

We will never use your personal information for non-healthcare-related reasons.

3. HIPAA Compliance

We strictly adhere to all HIPAA regulations to safeguard your protected health information (PHI). All staff members are trained in HIPAA compliance and are required to follow strict confidentiality standards.

Your information is confidential and will only be disclosed when required or permitted by law, or with your written authorization.

5. Use of Phone Numbers and Communication

Phone numbers and contact information you provide will **only be used for professional purposes**, such as:

- Appointment reminders or rescheduling
- Follow-up care communication
- Sharing updates related to your treatment
- Billing and administrative communication

You may choose your preferred method of communication (e.g., phone, voicemail, text, or email) and may opt out at any time.

No mobile information will be shared with third parties/affiliates for marketing/promotional purposes. All other categories exclude text messaging originator opt-in data and consent; this information will not be shared with any third parties

For text messages:

Message and Data Rates may apply, message frequency may vary. You can STOP messaging by sending STOP and get more help by sending HELP.

6. Data Security

We use physical, administrative, and technological safeguards to protect your information from unauthorized access, disclosure, or misuse. This includes:

- Secure record-keeping systems
 - Password-protected electronic files
 - Limited access to authorized personnel only
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7. Your Rights

Under HIPAA, you have the right to:

- Access and review your medical records
 - Request amendments to incorrect or incomplete information
 - Receive an account of disclosures
 - Request restrictions or confidential communications
 - File a complaint if you believe your privacy rights have been violated
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8. Contact Us

If you have any questions or concerns about this Privacy Policy or your rights under HIPAA, please contact:

Contact us:

Email: info@slpovertherainbow.com

Phone: 843-580-8107

Fax: 843-790-1879

You may choose your preferred method of communication (e.g., phone, voicemail, text, or email) and may opt out at any time.

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This Privacy Policy may be updated periodically to reflect changes in laws or our practices. Updates will be posted in our office and/or on our website if applicable.