EMMA
ERLER PLLC

HIPAA Notice of Privacy Practices

This notice describes how health information may be used and disclosed and how you can get access to this information please review it carefully.

I. MY PLEDGE REGARDING HEALTH INFORMATION:
I am required by law (HIPAA) to maintain your confidentiality and make every effort to keep your protected health information private. In addition, this practice is dedicated to maintaining the privacy of your personal health information as part of providing professional care. I create a record of care and services to ensure a direction to your sessions and continuity in service and to comply with certain legal requirements. This notice applies to all of the records of your care generated during our professional relationship. This notice will tell you about the ways in which I may use and disclose health information about you. I also describe your rights to the health information I keep about you, and describe certain obligations I have regarding the use and disclosure of your health information. I am required by law to:

- Make sure that protected health information ("PHI") that identifies you is kept private.
- Give you this notice of my legal duties and privacy practices with respect to health information.
- Follow the terms of the notice that is currently in effect.
- I can change the terms of this Notice, and such changes will apply to all information I have about you. The new Notice will be available upon request, and on my website.

II. HOW I MAY USE AND DISCLOSE HEALTH INFORMATION ABOUT YOU:
The following categories describe different ways that I typically use and disclose health information:

Treatment

- I can disclose your protected health information with other professionals who are involved in your care, in order to manage, provide, or coordinate care, or to provide referrals, and for consultation with other licensed health care providers.

Payment

- I can use your protected health information to verify insurance and coverage, and to process and collect fees.

Healthcare Operations

- I can use your protected health information to review treatment procedures or business activities, and for the purpose of training, certification, and compliance and licensing activities.

Other

- In addition, there are other circumstances in which I am allowed or required to disclose client health information without consent; typically these circumstances involve public safety and health. I only release information in accordance with state and federal laws and the ethics of the counseling profession. Examples of these situations could include:

  As required by law (e.g., preventing or reducing a serious threat to anyone's health or safety; assuring the Department of Health and Human Services that I am complying with federal privacy laws) · Emergencies · Mandates reporting · Responding to lawsuits or subpoena · Appointment scheduling · Treatment alternatives · To address worker's compensation, or other government requests

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

Request limits on uses and disclosures of health information

You have the right to ask me not to use or disclose certain health information for treatment, payment, or health care operations purposes. I am not required to agree to your request, and I may say no if I believe it would affect your health care. Your request must be in writing.

Request how I contact you

You have the right to ask me to contact you in a specific way (for example, home or mobile phone) for purposes of scheduling, payment, and therapeutic contact between sessions. I will do as requested unless unreasonable.

Inspect or request copy of your medical record

You can ask to see or get an electronic or paper your medical record and other information that I have about you, by filling out a record request form. I will provide you with a copy of your record, or a summary within 30 days of receiving your written request. I may deny the request, if I believe that reviewing your records by yourself could be harmful. I may require that we review your records together. I may charge a reasonable, cost based fee for copying, mailing, etc. You may ask me to release your health information to another person or provider by filling out a Release of Information (ROI) form. You may redact this release at any time.

Request an accounting of disclosure of your medical record

You have the right to request a list of instances (i.e., an accounting) in which I have shared your PHI, for six (6) years prior to the date of your request, including who I shared it with and why. I will provide this information within 60 days of request. This accounting will not include disclosures made for purposes of treatment, payment, or health care operations, disclosures made directly to you, the client, per the directives of a signed release form, or for the purposes of national security or law enforcement. I will provide the list at no charge, but if you make

more than one request in the same year, I may charge you a reasonable cost based fee for each additional request.

Correct or update your medical record
You have the right to request that I correct existing information or add missing information to your medical record. You must submit your request in writing and I will respond within 60 days. I may say deny the request, I will tell you why in writing. You may then file a disagreement statement, in writing, and this will be included in your record.

File a complaint if you believe your rights have been violated
You are asked to first approach me, so that I may correct the situation. If this does not satisfy your concern you may file a complaint with us with the U.S. Department of Health and Human Services for Civil Rights by sending a letter to: 200 Independence Avenue, S.W., Washington D.C.,20201, calling 1-877-696-6775, or visiting www.hhs.gov/ocr/privacy/hipaa/complaints. There will be no retaliation against you for filing a complaint.

Receive notice of any changes to this policy
If the terms of this notice change, those changes will apply to all of the health information I have about you. The new notice will be available to you upon request and on my website.

This notice is effective 1/23/2026
If you have any questions or concern about this notice or your privacy rights, please ask.