

Notice of Privacy Practices

Effective Date: June 14, 2025

Intro

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

Your health information is personal and confidential. This notice explains how your protected health information (PHI) may be used and shared, and how you can access this information. This notice is provided in accordance with the Health Insurance Portability and Accountability Act (HIPAA) and Massachusetts state law.

Our Legal Duty

We are required by law to:

- Maintain the privacy of your PHI
- Provide you with this Notice of our legal duties and privacy practices
- Abide by the terms of this Notice
- Notify you in the event of a breach of your unsecured PHI

How We May Use and Disclose Your Information

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

TREATMENT: To provide, coordinate, or manage your healthcare. For example, consultation with another therapist or psychiatrist involved in your care.

PAYMENT: To obtain payment for services provided to you, such as submitting claims to your insurance company or billing you directly.

HEALTHCARE OPERATIONS: For administrative purposes, quality improvement, audits, licensing, and training.

REQUIRED BY LAW: When required by federal, state, or local law, such as reporting suspected child or elder abuse, or in response to a court order.

PUBLIC HEALTH AND SAFETY: To prevent or lessen a serious and imminent threat to the health or safety of you or another person.

HEALTH OVERSIGHT ACTIVITIES: To government agencies responsible for oversight of the healthcare system (e.g., licensing boards, audits, investigations).

JUDICIAL AND ADMINISTRATIVE PROCEEDINGS: In response to a court or administrative order, subpoena, or other lawful process.

DECEASED INDIVIDUALS: To a coroner, medical examiner, or funeral director as required for lawful duties.

NATIONAL SECURITY, MILITARY, OR GOVERNMENT FUNCTIONS: As required for lawful intelligence, national security, or military purposes.

Uses and Disclosures Requiring Your Written Authorization

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We will not use or disclose your PHI for the following without your written permission:

- Psychotherapy notes (except as permitted by law)
- Marketing communications
- Sale of PHI
- Any other uses or disclosures not described in this notice

You may revoke your authorization in writing at any time, except where we have already acted in reliance on your authorization.

Your Rights Regarding Your PHI

You have the following rights regarding your protected health information:

RIGHT TO ACCESS: You have the right to inspect and receive a copy of your PHI, with limited exceptions. You may be charged a reasonable fee for copies or summaries.

RIGHT TO AMEND: You may request an amendment to your PHI if you believe it is incorrect or incomplete.

RIGHT TO AN ACCOUNTING OF DISCLOSURES: You may request a list of disclosures we have made of your PHI, excluding those made for treatment, payment, or healthcare operations.

RIGHT TO REQUEST RESTRICTIONS: You may request restrictions on the use or disclosure of your PHI. We are not required to agree to all requests, except when you pay in full out-of-pocket for a service and request that information about that service not be disclosed to your health insurer.

RIGHT TO CONFIDENTIAL COMMUNICATIONS: You may request that we communicate with you in a specific way (e.g., only by phone, or at a certain address).

RIGHT TO A PAPER COPY OF THIS NOTICE: You may request a printed copy of this Notice at any time, even if you have agreed to receive it electronically.

Additional Massachusetts Privacy Protections

Massachusetts law provides additional confidentiality protections for mental health, substance use disorder, and HIV-related information. In many cases, we will obtain your written consent before disclosing this information, even for purposes otherwise permitted by HIPAA.

Changes to This Notice

We reserve the right to change this Notice and our privacy practices at any time. Revised notices will be posted in our office and on our website, and made available upon request.

Complaints

If you believe your privacy rights have been violated, you may file a complaint with our office or with:

U.S. Department of Health and Human Services
Office for Civil Rights

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www.hhs.gov/ocr

You will not be penalized for filing a complaint.

Contact

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