

khora counseling

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Effective Date of this Notice: June 1st, 2022

NOTICE OF PRIVACY PRACTICES AND CLIENT RIGHTS

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

My pledge to you as your counselor: I respect client confidentiality and only release confidential information about you in accordance with state and federal law. This notice describes Khora Counseling Services' policies related to the use of the records of your care that I create in order to provide you with competent care while adhering to legal requirements. As your therapist, I am required by law to abide by the following:

- Ensure that any Protected Health Information ("PHI") that identifies you is kept private
- Give you this Notice of my Legal Duties and Privacy Practices with respect to your health information, and to follow the terms of the Notice that is currently in effect
- I can change the terms of this Notice, and the changes will apply to all the information I have about you. If I change the Notice, I will notify you and can provide you with a copy of the new Notice upon your request.
- If you have any questions about this policy or your rights, please contact me at lauren@khoracounseling.com or (205) 964-7198.

USE AND DISCLOSURE OF PROTECTED HEALTH INFORMATION, OR "PHI"

In order to effectively provide you care, and as an Associate Licensed Counselor under the Supervision of an LPC-S in the state of Alabama, there will be times when I will need to share your confidential information with my Supervising LPC, Horace Hackney (LPC-S 3540). This also includes information to be used for:

Treatment: I may use or disclose treatment information about you to provide, coordinate, or manage your care or any related services, including sharing information with others outside our clinics that we are consulting with or clinics to which you are being referred. Payment: With your written consent, information will be used to obtain payment for the treatment and services provided. We may use information about you to coordinate our business activities. This may include setting up your appointments or reviewing your care with my supervisor.

Information disclosed without your consent: Under state and federal law, information about you may be disclosed without your consent in the following circumstances:

Emergencies: Sufficient information may be shared to address the immediate emergency you are facing. Follow-up Appointment/Care: We may be contacting you to remind you of future appointments or information about treatment alternatives or other health-related benefits and services that may be of interest to you. We may leave a voicemail regarding appointment information unless you tell us not to.

As Required by Law: This would include situations where we have a subpoena, court order, or are mandated to provide public health information, such as communicable diseases or suspected abuse and/or neglect such as child abuse or elder abuse. Coroners: We are required to disclose information about the circumstances of your death to a coroner who is investigating it. Governmental Requirements: We may disclose information to a health oversight agency for activities authorized by law, such as audits, investigations, inspections, and licensure. Information may also need to be shared with the Food and Drug Administration related to adverse events or product defects. We are also required to share information, if requested, with the Department of Health and Human Services to determine our compliance with federal laws related to health care.

Criminal Activity or Danger to Others: Khora Counseling Services has the right to involve law enforcement when it is believed that you, I, or someone else is in immediate danger, or when a crime has been committed against me or on the premises of my office.

CLIENT RIGHTS STATEMENT

The following rights are extended to each client for Outpatient Services for all ages without reservation or limitation:

1. The right to confidentiality: The client has the right to every consideration of privacy concerning his or her medical care program, including HIV status and testing. All case discussion, consultation, communications, records, and medical information pertaining to his or her care will be treated as private and confidential;
2. The right to have impartial access to treatment regardless of age, psychological characteristics, sexual orientation, physical condition, race, religion, gender, ethnicity, marital status, HIV status, criminal record, or source of financial support;
3. The right to have personal dignity recognized and respected in the provision of all care and treatment;
4. The right to religious freedom;
5. The right to receive individualized treatment including the provision of an individualized treatment plan based upon information of all assessments, active participation in the development of the treatment plan by the client with periodic review of the plan by staff, and implementation and supervision of the plan by qualified professional staff;
6. The right to make decisions about the treatment plan prior to and during the course of treatment and to refuse a recommended treatment or plan of care to the extent permitted by law and to be informed of the medical consequences of this action. In case of such refusal, the client is entitled to referrals to other appropriate care or service providers;
7. The right to know the immediate and long-term financial implications of treatment choices, insofar as they are known;
8. The right to obtain from clinician, or other staff involved in direct care, relevant, current, and understandable information concerning diagnosis, treatment, and prognosis. The right to review the records pertaining to his/her treatment and to have the information explained or interpreted as necessary, except when restricted by law. If you request a copy of your records, we may charge you a reasonable fee for copying and mailing your record.
9. The right to know the identity of physicians, nurses, and others involved in their care, as well as when those involved are students, interns, residents, or other trainees.
10. The right to expect that, within its capacity and policies, the practice will make reasonable response to the request of a client for appropriate and medically indicated care and services. Khora Counseling Services must provide evaluation, service, and/or referral as indicated by the urgency of the case. When medically and ethically appropriate, in the event that the counselor determines that a client's needs can be better met by another provider or specialist, the counselor will provide referral options to the client to continue their treatment. The client must also have the benefit of complete information and explanation concerning the need for, risks, benefits, and alternatives to such a referral;
11. The right to ask and be informed of the existence of business relationships among the clinic, hospital, educational institutions, other health care providers, or payers that may influence the client's treatment and care;
12. The right to consent to or decline to participate in proposed research studies or human experimentation affecting care and treatment or requiring direct client involvement, and to have those studies fully explained prior to consent. A client who declines to participate in research or experimentation is entitled to the most effective care that the clinic can otherwise provide;

13. The right to receive prescribed services within the least restrictive but appropriate environment;
14. The right to assurance and protection of privacy and confidentiality of communication with treatment staff, and of material written in the client's individualized record;
15. The right to be presumed mentally competent unless a court has ruled otherwise;
16. The right to a clean and humane environment in which you are protected from harm, have privacy with regard to personal needs, and are treated with respect and dignity;
17. The right to be free from mistreatment, abuse, neglect, and exploitation;
18. The right to expect reasonable continuity of care when appropriate and to be informed by clinicians and other caregivers of available and realistic client care options.
19. The right to initiate a complaint or grievance, with the assurance of no retaliation, and to be informed of the appropriate grievance process;
20. The right to be informed that Khora Counseling Services, LLC has the right to terminate care with a 30 day written notification given to the client with a listing of referrals for continuity of care;
21. The right to request an amendment to your record if you believe something in your record is incorrect or incomplete. Ask for the Request to Amend Health Information form.
22. If you have a complaint about the services provided, you may file a grievance by doing the following:

Step One: Discuss the issue with your therapist. They are there to help you with any issue that arises.

It is never an inconvenience for them to assist you.

Step Two: If the therapist is not able to adequately assist you with your concern and you have still not had your issues resolved, please contact the Alabama Board of Examiners in Counseling at 334-420-7229 or <https://abec.alabama.gov/complaints/>

FILING OF COMPLAINTS AGAINST HIPAA-COVERED ENTITIES BELIEVED TO BE NON-COMPLIANT WITH HIPAA PRIVACY RULE:

Complaints must be written to the Secretary of HHS, have occurred on or after April 14, 2003, and meet the following requirements:

- Be filed in writing, either on paper or electronically;
- Name the entity that is the subject of the complaint and describe the acts or omission believed to be in violation of the applicable requirements;
- Be filed within 180 days of when the complainant knew or should have known that the act or omission complained of occurred, unless this time limit is waived by the ORC for good cause is shown. Electronic complaints should be sent to ORCComplaint@hhs.gov. Mailed complaints must be addressed to the ORC regional office that is responsible for matters relating to the Privacy Rule arising in the State or jurisdiction where the covered entity is located. We are located in Region IV (Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, or Tennessee)

Office for Civil Rights U.S. Department of Health and Human Services Atlanta Federal Center, Suite 3B70
61 Forsyth Street
SW Atlanta, GA 30303-8909