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Notice of Privacy Practices

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.

1. PURPOSE:

Amy Eichler, Ph.D. and her professional staff, employees, and post-doctoral residents follow the privacy practices described in this Notice. Amy Eichler, Ph.D. keeps your mental health information in records that will be maintained and protected in a confidential manner, as required by law. Please note that in order to provide you with the best possible care and treatment, all professional staff involved in your treatment and employees involved in the health care operations of the agency have access to your records.

2. WHAT ARE TREATMENT and HEALTH CARE OPERATIONS?

Your treatment includes sharing information among mental health care providers who are involved in your treatment. For example, if you are seeing both an individual counselor and a family therapist, they may share information in the process of coordinating your care with a proper release. Treatment records may be reviewed as part an on-going process directed toward assuring the quality of operations. Staff members designated by the Quality Improvement Committee may access clinical records periodically to verify that standards are met.

3. HOW WILL AMY EICHLER, PH.D. USE MY PROTECTED HEALTH INFORMATION (PHI)?

Your personal mental health record will be retained by Amy Eichler, Ph.D. for at least seven years after your last clinical contact with her. After that time has elapsed, the record will be shredded or otherwise destroyed in a way that protects your privacy.

Until the records are destroyed they may be used, unless you ask for restrictions on a specific use or disclosure, for the following purposes:

- Appointment reminders;
 - Notification when an appointment is cancelled or rescheduled;
 - As may be required by law;
 - For public health purposes such as reporting of child or elder abuse or neglect; reporting reactions to medications; infectious disease control; notifying authorities of suspected abuse, neglect, or domestic violence (if you agree or as required by law);
 - Mental health oversight activities, e.g., audits, inspections or investigations of administration and management;
 - Lawsuits and disputes (We will attempt to provide you advance notice of subpoena before disclosing information from your record.);
 - Law enforcement (e.g., in response to a court order or other legal process) to identify or locate an individual being sought by authorities; about victim of a crime under restricted circumstances; about a death that may be the result of criminal conduct; about criminal conduct that occurred in the Counseling Center; when emergency circumstances occur relating to a crime;
 - To prevent a serious threat to health or safety;
 - To carry out treatment and health care operations functions through medical transcription services;
 - To military command authorities if you are a member of the armed forces or a member of a foreign military authority;
 - National security and intelligence activities;
 - Protection of the President or other authorized persons for foreign heads of state, or to conduct special investigations.
 - To support the operations and functioning of the practice. All business associates (e.g., electronic health record vendor) connected to the practice are obligated to protect the privacy and security of your PHI and may not use or disclose your PHI other than as specified in our agreements with them.
4. **YOUR AUTHORIZATION IS REQUIRED FOR OTHER DISCLOSURES.** Except as described previously, we will not use or disclose information from your record unless you authorize (permit) in writing for Amy Eichler, Ph.D. to do so. You may revoke your permission, which will be effective only after the date of your written revocation.
5. **YOU HAVE RIGHTS REGARDING YOUR PROTECTED HEALTH INFORMATION (PHI).** You have the following rights regarding your health information, provided that you make a written request to invoke the right to Amy Eichler, Ph.D.
- Right to request restriction. You may request limitations on your mental health information we may disclose, but we are not required to agree to your request. If we agree, we will comply with your request unless the information is needed to provide you with emergency treatment. Right to confidential communications. You may request communications in a certain way or at a certain location, but you must specify how or where you wish to be contacted.
 - Right to inspect and copy. You have the right to inspect and copy your mental health information regarding decisions about your care. We may charge a fee for copying, mailing, and supplies. Under limited circumstances, your request may be denied.
 - Right to an electronic copy of mental health records. If your PHI is maintained in an electronic format (known as an electronic health record), you have the right to request that an electronic copy of your record be given to you or another individual or entity. We will make every effort to provide access to

your PHI in the form or format you request, if it is readily producible in that form or format. If it is not readily producible in the form or format you request, your record will be provided in either our standard electronic format, or, if you do not want this format, as a readable hard copy. We may charge a fee for transmitting the electronic health record.

- Right to request a clarification of record. If you believe that the information we have about you is incorrect or incomplete you may ask to add clarifying information. Amy Eichler, Ph.D. is not required to accept the information that you propose.
- Right to accounting of disclosures. You may request a list of the disclosures of your mental health information that have been made to persons or entities other than for treatment or health care operations. Right to receive notice of a breach. You have the right to be notified upon a breach of any of your unsecured PHI.
- Right to a copy of this Notice. You may request a paper copy of this Notice at any time, even if you have been provided with an electronic copy.

6. REQUIREMENTS REGARDING THIS NOTICE.

Amy Eichler, Ph.D. is required to provide you with this Notice that governs our privacy practices. The Counseling and Mental Health Center may change its policies or procedures in regard to privacy practices. If and when changes occur, the changes will be effective for mental health information we have about you as well as any information we receive in the future. Any time you come in to see Amy Eichler, Ph.D. for an appointment, you may ask for and receive a copy of the Privacy Notice that is in effect at the time.

7. COMPLAINTS.

You may complain to us or to the Secretary of Health and Human Services if you believe your privacy rights have been violated by us. If you have any further questions regarding HIPAA, you may visit www.hhs.gov/ocr/hipaa or call directly at 1-800-627-7748. We will not retaliate against you for filing a complaint.