

CORPORATE OFFICE: 1100 14th St., Suite A Modesto, CA 95354 MAILING ADDRESS: P.O. Box 5157 Modesto, CA 95352 **T** 209.572.2589 **F** 209.809.3432 www.tpathways.org

HIPAA 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.

Our Legal Duty: Therapeutic Pathways is legally obligated to keep your family's protected health information private. This includes any information that can identify you or your child, including information regarding diagnoses, treatment, and payment for treatment. The following explains when, why, and how Therapeutic Pathways would disclose any health information outside of our practice.

How We Collect Information About You and Your Child: Therapeutic Pathways and its employees collect data through a variety of means including, but not necessarily limited to, letters, faxes, phone calls, emails, and information provided directly from you. We may collect information from medical, psychological, and language assessment reports, financial and insurance correspondence, and collaboration with other health professionals or regional centers involved with your child's care.

When, why, and how we will Use and Disclose Your Information: Therapeutic Pathways will use (within our agency) and disclose (share with a third party) your protected health information under the following conditions:

Treatment: Therapeutic Pathways will use and disclose your protected health information with physicians, psychologists, speech and language pathologists, or any other licensed provider involved with your child's care, with your written permission. For example, if a physician is treating your child, we may disclose your protected health information to that physician in order to coordinate your child's care.

Reporting to Funding Agencies: Therapeutic Pathways will use and disclose your protected health information with involved funding agencies, such as your health insurance company, your child's regional center, or your child's school district, when applicable. For example, we will send quarterly reports of your child's treatment progress to the involved agency(s) in order to collaborate on the best care options.

Payment: Therapeutic Pathways will use and disclose your protected health information in order to bill and collect payment for the treatment and services provided to you and your child. For example, we may send your information to your insurance company in order to get payment for treatment provided to your child. Therapeutic Pathways also discloses your information to business associates, such as billing and claims processing agencies, who also protect your health information in accordance with the HIPAA standards.

Health Care Operations: Therapeutic Pathways will use and disclose your protected health information to facilitate the efficient and correct operation of our agency. For example, Therapeutic Pathways may share your information in the evaluation of our practices in order to improve our standard of care. We may also share your information with our attorneys, accountants, consultants, and other business associates to ensure that we are in compliance with all applicable laws. Other uses and disclosures requiring written authorization: Therapeutic Pathways may use or disclose your protected health information for purposes outside of those mentioned above when your appropriate authorization is obtained first, before releasing this information. For example, we will need your authorization before



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releasing your child's program information (program information includes assessment and treatment data and the associated written reports). You may revoke all such authorizations at any time, provided each revocation is in writing. You may not revoke an authorization if Therapeutic Pathways has relied on that authorization for treatment and/or assessment, or if the authorization was granted as a condition of obtaining insurance coverage (the law provides the insurer the right to contest the claim).

Uses and disclosures which do not require your written authorization: Certain circumstances require Therapeutic Pathways to disclose your protected health information without your prior consent. Your or your child's information will be released in cases of:

- Child Abuse and Adult/Domestic Abuse
- Health Oversight Activities: If Therapeutic Pathways receives a subpoena from a regulation board, Therapeutic Pathways must disclose any protected health information requested by the board.
- Judicial and Administrative Proceedings: If you are involved in court proceedings, and we receive a court order for your private information, Therapeutic Pathways must provide all court ordered information. We will attempt to inform you first. This also applies to situations when disclosure is necessary to arrange for legal services to enforce or defend Therapeutic Pathways' legal rights.
- Serious Threat to Health or Safety of Self or Others
- National Security

Your Rights: You have rights concerning your and your child's protected health information as follows:

- Further Restrictions: You may request restrictions on uses and disclosures of protected health information. Therapeutic Pathways is not required to agree to the requested restriction, but will consider all requests carefully.
- Confidential Communication: You may receive confidential communications from Therapeutic Pathways regarding your and your child's protected health information. For example, you may request information be sent to an alternate address, such as your work address.
- Access To Your File: You may inspect and request a copy of your and your child's protected health information. If you request a copy of a substantial amount of information, Therapeutic Pathways may charge a copying fee.
- Amendments: You may amend your or your child's protected health information if you believe our files have erroneous information or if you feel pertinent information has been omitted.

List of Disclosures: You may receive a list of any disclosures of your or your child's protected health information that Therapeutic Pathways has made. This list will not include disclosures you have already consented to, such as quarterly reports made to cooperating or funding agencies. A complete list of disclosures dated September 01, 2011 forward will be available for a period of five years after your child no longer receives treatment from Therapeutic Pathways.

Therapeutic Pathways holds your protected health information in the strictest of confidence. We never provide, exchange, barter, rent, sell, lend, or disseminate any information about applicants or clients who apply for or actually receive our services. Information is only used and disclosed when it is deemed reasonably necessary to process your application or to provide your child with services. Therapeutic Pathways is required to abide by the terms of this notice. If Therapeutic Pathways makes any changes to the terms of this notice, we will update this notice and inform you in writing before those changes take effect. The updated notice will apply to all information already contained in our file



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as well as new information obtained from that point on. You may request a written copy of this notice at any time, or you may view a copy of it at one of our offices.

If you have questions, concerns, or complaints, please contact Therapeutic Pathways at the address and phone number listed below. Any complaints regarding inappropriate use or disclosure of information will be thoroughly investigated. Therapeutic Pathways ensures that no retaliation against you or your child will occur as a result of filing your complaint.

Brian Castro, Privacy Officer Email: privacy@tpathways.org Phone (209) 422-3235 Fax (209) 572-1461

PO Box 5157 Modesto, CA 95352-5157

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