



37875 W. 12 Mile Rd. Suite 204
Farmington Hills, MI 48331
(248) 798-4402
(248) 910-1591
(248) 703-2578

NOTICE OF PRIVACY PRACTICES

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

Effective date: March 1, 2007

We respect the confidentiality of your health information and recognize that information about your health is personal. We are committed to protecting your health information. It will only be released in accordance with state and federal laws and with the ethics of the counseling profession.

This notice describes the policies of Lifestart Counseling, PLLC, related to the use and disclosure of our clients' healthcare information, which we refer to as our "Privacy Practices". Protected health information generally includes information that we create or receive that identifies you and your past, present, or future health status or care, or the provision of, or payment for, that health care.

Use and disclosure of protected health information for the purposes of providing services. Providing treatment services, collecting payment and conducting healthcare operations are necessary activities for quality care. State and federal laws allow us to use and disclose your health information for these purposes.

TREATMENT - Use and disclose health information to:

- Provide, manage or coordinate care. For example, we may disclose information to psychiatrists, physicians, or other health care workers involved in your care.
- Consultation/Supervision. Your counselor consults regularly with other professionals regarding their clients, however, the client's name or other identifying information is never disclosed. The client's identity remains completely anonymous and confidentiality is fully maintained.
- Referral sources

PAYMENT – Use and disclose health information to:

- Verify insurance and coverage
- Process claims and collect fees



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HEALTHCARE OPERATIONS – Use and disclose health information for:

- Review of treatment procedures. For example, we may use health information to assess the scope of our services or to determine if additional health services are needed.
- Review of business activities
- Certification
- Staff training
- Compliance and licensing activities

OTHER USES AND DISCLOSURES WITHOUT YOUR CONSENT

- Mandated reporting, such as that required in cases of neglect or abuse.
- Emergencies, such as the prevention of a serious threat to the health or safety of yourself or others.
- Criminal damage
- Appointment scheduling
- Treatment alternatives
- As required by law



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CLIENT RIGHTS

You have the following rights:

Right to request where we contact you:

- Home yes or no
- Work yes or no
- Cell phone yes or no
- If not, how may we contact you _____

Right to release your medical records:

- Written authorization to release records to others.
- Right to revoke this release in writing.
- Revocation is not valid to the extent we have acted in reliance on such previous authorization.

Right to inspect and copy your medical billing records:

- Right to inspect and copy records.
- Counselor may deny this request.
- There will be charges assessed for copying and mailing.

Right to add information or amend your medical records:

- You may request to amend your medical record.
- The amendment request must be in writing.
- The counselor has 30 days after receiving a request to amend the medical record to make a decision.
- Counselor may deny the request to amend the record.
- If the amendment request is denied, you have the right to file a disagreement statement.
- The disagreement statement and the counselor's response will be filed in the medical record.

Right to an accounting of disclosures:

- For a six year period beginning March 1, 2007
- Exceptions:
 - Disclosure for treatment, payment, or healthcare operations
 - Disclosures pursuant to a signed release
 - Disclosure made to client
 - Disclosures for national security or law enforcement



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Right to request restrictions on uses and disclosures of your healthcare information:

- The request must be in writing.
- Counselor is not obligated to agree with request.
- Any restriction that we may approve will not affect any use or disclosure that we are legally required or permitted to make under the law.

Right to complain:

- Please contact your counselor first.
- If not satisfied with your counselor's response, you have the right to complain to the U.S. Department of Health and Human Services.
- Filing a complaint will not affect the services you receive from Lifestart Counseling, PLLC.

Right to receive changes in our Privacy Practices:

- You may request to be notified of any future changes in our Privacy Practices.
- Revised Privacy Practices may be obtained in the office of Lifestart Counseling or by calling (248) 910-1591, (248)798-4402 or (248)703-2578.