

# Notice of Privacy Practices

Open Horizons Counseling and Behavioral Health Services LLC  
Asha Islaw, LICSW  
507-218-7087 | islawasha@gmail.com

Effective Date: \_\_\_\_\_

## **THIS NOTICE DESCRIBES HOW YOUR HEALTH INFORMATION MAY BE USED AND DISCLOSED AND HOW YOU CAN ACCESS IT. PLEASE REVIEW IT CAREFULLY.**

Open Horizons Counseling and Behavioral Health Services LLC is required by federal and state law, including HIPAA, to protect the privacy and security of your Protected Health Information (PHI). We are legally obligated to follow the practices described in this notice.

## **How We Use & Share Your Information**

- 1 **Treatment:** To provide, coordinate, and manage your mental health care.
- 2 **Payment:** To bill and collect payment from you, your insurance, or EAP programs.
- 3 **Health Care Operations:** Administrative, supervision, licensing, and quality improvement activities.
- 4 **Legal Requirements:** When required by federal, state, or local law.
- 5 **Safety:** To prevent serious and imminent harm.
- 6 **Abuse/Neglect Reporting:** As required by law.
- 7 **Legal Proceedings:** Court orders or subpoenas.
- 8 **Health Oversight:** Audits and investigations.
- 9 **Emergencies:** When necessary for emergency care.
- 10 **Consultation:** Professional consultation with limited identifying information.

## **Special Note: EAP Services**

If you are using an Employee Assistance Program (EAP), limited information may be shared as required for authorization and payment. Records are maintained in compliance with legal and ethical standards.

## **Your Rights Under HIPAA**

- 1 Access and obtain copies of your records
- 2 Request amendments to your information
- 3 Receive an accounting of disclosures
- 4 Request restrictions on use or disclosure
- 5 Request confidential communication methods
- 6 Receive a copy of this notice

## **Electronic Communication**

Email and text messaging may be used for administrative purposes but are not fully secure. By choosing these methods, you accept associated risks.

## **Breach Notification**

You will be notified as required by law if a breach of your unsecured PHI occurs.

## **Changes to This Notice**

We reserve the right to update this notice at any time. Updates will be posted on our website.

## **Complaints**

If you believe your privacy rights have been violated, you may contact Asha Islaw, LICSW or file a complaint with the U.S. Department of Health and Human Services. You will not be penalized for filing a complaint.

## **Contact Information**

Asha Islaw, LICSW  
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