NOTICE OF PRIVACY PRACTICES

Triangle Psychiatric Services, PA

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.

Privacy contact: Privacy Officer 2501 Atrium Drive, Suite 250 Raleigh, NC 27607	**Phone:** (919) 845-1555 **Fax:** (919) 845-1558 **Email:** medicalrecords@triangle-psychiatric-services-pa.com

Effective date: August 18, 2026

This notice applies to Triangle Psychiatric Services, PA and its clinicians and workforce when they create, receive, maintain, or share your protected health information on behalf of the practice.

Your information. Your rights. Our responsibilities.

YOUR RIGHTS	YOUR CHOICES	OUR USES AND DISCLOSURES
• Get an electronic or paper copy of your record • Ask us to correct your record • Request confidential communications • Ask us to limit what we use or share • Get an accounting of certain disclosures • Get a paper copy of this notice • Choose a personal representative • File a privacy complaint	• Tell us whether to share information with family, friends, or others involved in your care or payment • Tell us your preference for disaster-relief disclosures • Authorize uses that HIPAA or other law does not otherwise permit	• Treat you • Run our practice • Bill for services • Address public health and safety issues • Comply with law and authorized oversight • Respond to certain legal and government requests

Special protection for certain substance use disorder records: To the extent we have records protected by 42 CFR Part 2, those records cannot be used or disclosed in civil, criminal, administrative, or legislative investigations or proceedings against you unless you provide written consent or a Part 2 court order is accompanied by a subpoena or similar legal requirement.

Your rights

When it comes to your health information, you have the following rights. Contact the Privacy Officer using the information on page 1 to exercise a right or ask how to submit a request.

Get an electronic or paper copy of your medical record

- You can ask to see or receive an electronic or paper copy of your medical record and other health information we maintain about you.
- We generally will provide a copy or summary within 30 days. We may charge a reasonable, cost-based fee as allowed by law.
- HIPAA generally does not give a right of access to psychotherapy notes, as that term is specifically defined by HIPAA, although other parts of your record remain subject to access rights. Other limited exceptions may apply.

Ask us to correct your medical record

- You can ask us in writing to correct health information you believe is incorrect or incomplete.
- We may deny the request in some circumstances, but we will explain the denial in writing, generally within 60 days, and describe any right to submit a statement of disagreement.

Request confidential communications

- You can ask us to contact you in a specific way, such as only at a particular phone number, or to send mail to a different address. We will agree to reasonable requests.

Ask us to limit what we use or share

- You can ask us not to use or share certain information for treatment, payment, or health care operations. We are not generally required to agree, and we may decline if the restriction could affect your care. If we agree, we will follow the restriction except when information is needed for emergency treatment or disclosure is otherwise permitted or required by law.
- If you pay in full out of pocket for a service, you can ask us not to disclose information about that service to your health plan for payment or health care operations. We will agree unless the disclosure is required by law.

Get a list of certain disclosures

- You can ask for an accounting of certain disclosures made during the six years before your request. The accounting generally does not include disclosures for treatment, payment, or health care operations, disclosures you authorized, or certain other disclosures excluded by law.
- We will provide one accounting in a 12-month period at no charge. We may charge a reasonable, cost-based fee for an additional accounting during that period after telling you the cost in advance.

Get a copy of this notice

- You can ask for a paper copy at any time, even if you agreed to receive it electronically. We will provide a copy promptly.

Choose someone to act for you

- A person with legal authority to act as your personal representative, such as a health care agent or legal guardian, may exercise rights and make choices about your information. We will verify that authority before acting. Special rules may apply to minors and to information for which a minor may consent to care.

File a complaint if you believe your rights were violated

- You may complain to our Privacy Officer using the contact information on page 1.
- You may also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by writing to 200 Independence Avenue, S.W., Washington, DC 20201, calling 1-877-696-6775, or visiting https://www.hhs.gov/hipaa/filing-a-complaint/.
- We will not retaliate against you for filing a complaint.

Your choices

For certain health information, you can tell us your preferences about what we share. Tell us what you want us to do, and we will follow your instructions when the law allows.

Family, friends, and others involved in your care

- You may tell us to share information relevant to your care or payment with family members, close friends, or others you identify.
- You may tell us your preference for sharing information with a disaster-relief organization.
- If you cannot tell us your preference, such as when you are unconscious, we may share relevant information if we believe it is in your best interest. We may also share information when necessary to prevent or lessen a serious and imminent threat to health or safety.

Uses that generally require your written authorization

- Most uses or disclosures of psychotherapy notes, as HIPAA defines that term
- Marketing uses or disclosures that require authorization under HIPAA
- The sale of your health information
- Other uses or disclosures not described in this notice unless another law permits or requires them

If you give written authorization, you may revoke it in writing at any time. Revocation will not affect actions already taken in reliance on the authorization. We do not sell your health information and do not use it for fundraising.

How we typically use or share your information

Treat you

We can use your information and share it with other professionals who are treating you or coordinating your care. **Example:** We may send medication and diagnosis information to a physician who is treating a medical condition that may affect your psychiatric care.

Run our practice

We can use and share your information to operate the practice, improve care, train our workforce, conduct quality review, and contact you when necessary. **Example:** We may review records to evaluate whether our services meet clinical and documentation standards.

Bill for services

We can use and share your information to bill and obtain payment from health plans or other entities. **Example:** We may send diagnosis, service, and authorization information to your insurer so it can process a claim.

Technology and documentation support

We may use service providers and secure technology, including tools that assist with clinical documentation, to support treatment and practice operations. These parties may access information only as permitted by law and by written agreements requiring them to protect it. If technology records a session, we will notify you and obtain consent when required.

Other permitted or required uses and disclosures

We may use or share information in other ways that serve the public interest or are required by law. We must meet all applicable legal conditions and will apply any more protective federal or state law.

Public health and safety

Preventing or controlling disease; reporting adverse reactions or product problems; reporting suspected abuse, neglect, or domestic violence; and preventing or lessening a serious threat to health or safety.

Research

Using or sharing information for health research when an authorization, institutional approval, or another legally permitted basis applies.

Complying with law and oversight

Making disclosures required by federal or state law, including to the U.S. Department of Health and Human Services to demonstrate compliance, and to authorized health oversight agencies.

Workers' compensation and government functions

Addressing workers' compensation claims, certain law-enforcement requests, military or national-security functions, correctional settings, and other government requests when legal requirements are met.

Medical examiners, funeral directors, and donation

Sharing information with a coroner, medical examiner, funeral director, or organ-procurement organization when permitted by law.

Legal proceedings

Responding to a court or administrative order, subpoena, or other lawful process only after applicable conditions are met and subject to special protections for mental health, psychotherapy, and Part 2 records.

Business associates

Sharing information with contractors who perform services for us, such as billing, records storage, or technology support, when they are bound by written agreements to safeguard the information.

Special protection for substance use disorder records

To the extent we create, receive, or maintain substance use disorder patient records protected by 42 CFR Part 2, we will not use or disclose those records, or testimony describing their contents, in any civil, criminal, administrative, or legislative investigation or proceeding against you unless you provide written consent or a Part 2 court order is accompanied by a subpoena or similar legal requirement. Other Part 2 restrictions may also apply.

North Carolina and other more protective laws

North Carolina and other federal laws may provide greater protection for certain information, including mental health, substance use disorder, communicable disease, and other specially protected records. When a more protective law applies, we will follow it. Mental health information subject to North Carolina General Statutes Chapter 122C will be disclosed only with written consent or as otherwise permitted or required by applicable law, which may include certain treatment, payment, emergency, safety, abuse or neglect reporting, oversight, or court-ordered purposes.

Our responsibilities

- We are required by law to maintain the privacy and security of your protected health information.
- We will notify you promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in the notice currently in effect and provide you a copy.
- We will not use or share your information other than as described in this notice unless you authorize it in writing or the law otherwise permits or requires it.

Changes to this notice

We may change the terms of this notice, and the revised terms may apply to all information we maintain, including information created or received before the change. A revised notice will state its effective date and will be available upon request, posted in our office, and posted on our website.

Questions, requests, or complaints: Privacy Officer | (919) 845-1555 | medicalrecords@triangle-psychiatric-services-pa.com
2501 Atrium Drive, Suite 250, Raleigh, NC 27607