

Notice of Privacy Practices

Triangle Psychiatric Services, PA

This notice describes how medical information about you may be used or disclosed and how you can access this information.

If you have questions or requests, please contact us at:

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Raleigh, NC 27607

(919) 845-1555

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A. Introduction

This HIPAA Privacy Policy contains our Practice policies, procedures, and standards of conduct designed to ensure our compliance with applicable Federal laws and regulations. Failure to abide by the rules, policies and procedures established by this Policy or behavior in violation of any HIPAA law, regulation or rule may result in disciplinary action. Willful failure by any employee of the Practice to comply with the policies and procedures contained in this Plan, will result in employment dismissal. Consult the Personnel Policy Manual or contact our HIPAA Compliance Personnel if you have any questions about our Practice commitment to effective compliance routines.

B. Compliance Mission Statement

This Practice strives at all times to maintain the highest degree of integrity in its interactions with patients and the delivery of quality health care. The Practice and its employees will at all times strive to maintain compliance with all laws, rules, regulations and requirements affecting the practice of medicine and the handling of patient information. The protection of the privacy of an individual's health information and the security of an individual's electronic protected health information ("ePHI") is a critical concern to this Practice, and to the trust our patients offer in our treatment of their medical issues.

C. Privacy Policies

1. Notice of Privacy Practices

The HIPAA Privacy Regulations require health care providers to furnish patients with a written notice of the Practice's policies and procedures regarding the use and disclosure of protected health information. This Notice of Privacy Practices is the starting point under HIPAA. It describes how the Practice will be handling confidential patient information in accordance with the HIPAA regulations. Please review it carefully so that you can explain it to patients if asked.

Front desk personnel should provide each patient (new or established), at the time of the first office visit, with a copy of the Notice for review and return to the front desk prior to being seen by the doctor. The Practice will also keep on hand paper copies of the Notice for patients who ask for a take-home copy. A current copy of the Notice need only be provided once to the patient.

If the Notice is ever materially changed in terms of the description of permitted disclosures, patient rights, the Practice's legal duties, or other privacy practices, then the revised notice will be posted on our website and in the office and made available upon request.

2. Staff Access to Information

HIPAA provides that staff member job functions should be reviewed to determine the level of PHI access that the staff member strictly needs to do their job. Staff members should only have the minimum access necessary, and no more.

3. Authorizations

"Authorizations" are basically patient consent forms that contain certain specific provisions required by HIPAA. Typical situations where authorizations are needed are:

- Release of medical records to qualify for life insurance coverage;
- Release of school physical results to the school, for purposes of qualifying for team sports, etc., unless the disclosure involves only immunizations and the parent or guardian has indicated their consent to the release through some other written agreement or through oral assent which has been documented. (You can also simply give the PHI directly to the parent/guardian or patient and direct them to give the information to the school);
- Clinical trial participation (release of information to pharmaceutical company is not for treatment; it's for research, which is not a HIPAA exception);
- Completion of Family Medical Leave Act forms for employers (release of information to employer is not "treatment" – easiest course again is to give the patient the information, and instruct them to give the information to the employer); or
- Psychotherapy notes in the chart (psychotherapy notes are notes by a mental health professional regarding the contents of counseling conversations and do not include such items as medication information, results of clinical tests, summary of diagnosis or symptoms or prognosis or progress to date).

When you fill out the Authorization Form, note the required "expiration date" or "expiration event." This may be any date or event desired by the patient relating to him or her or the purpose of the disclosure. For instance, for authorization to provide the patient's employer with reports for Family and Medical Leave Act purposes, you could specify the expiration date as "termination of employment." For research disclosures only, "none" may be specified as the expiration. Sometimes you may receive an Authorization form signed by the patient that is on "somebody else's form." For instance, frequently life insurance companies have their medical technicians obtain the patient's signature on a form at the time when all the other paperwork is filled out and the patient gives a blood sample. The life insurance company then sends the form to you, asking for the medical records. Can you accept this form, or do you need to have the

patient execute the Practice's own authorization form? You may accept an outside party's Authorization form provided it has all the elements required by HIPAA. These are:

- a. A specific description of information to be used or disclosed;
- b. The identification of specific individuals authorized to make the requested use or disclosure of the information;
- c. The identification of specific individuals to whom the practice may make the requested use or disclosure of the information;
- d. A description of each purpose of the requested use or disclosure;
- e. The expiration date of the use or disclosure;
- f. A statement of the patient's right to revoke the Authorization at any time in writing along with the procedure for revocation;
- g. A statement that the provider may not withhold treatment if the patient refuses to sign the authorization (except as noted below for research, school physicals and other situations where treatment would not normally be provided unless the patient authorized disclosure of his or her PHI);
- h. A statement that the PHI used or disclosed may be subject to re-disclosure by the party receiving the information and may no longer be protected;
- i. Patient's signature and date.

If the form you are sent does not have these elements, have the patient execute the Practice's Authorization Form. Please be sure to give the patient a copy of the authorization, when it is signed, for their records.

4. Use of AI-Based Documentation Tools

We may, with your knowledge and consent, use secure AI-based tools to assist with clinical documentation. This may include clinical notes, summaries, transcripts, or recordings to support accurate and timely care.

These tools:

- Will only be used with your awareness.
- Will never replace direct human review and oversight by your provider.
- May be declined at any time without affecting your access to care.

Documentation created or supported by AI remains protected by the same confidentiality standards and is reviewed by a licensed provider prior to being entered into the medical record.

5. Minors and Incompetent Patients

As noted, minors and incompetent patients generally cannot sign the Written Acknowledgment form for themselves. Typically, they do not have the legal authority to do this. Only the person(s) who have the ability to give informed consent for the minor or incompetent patient, under state law, can exercise these rights.

Normally, in the case of a minor, it is the parent who has such right to give informed consent for the child. Therefore it is the parent who signs the Written Acknowledgment or the Authorization or other forms and who exercises the child's HIPAA rights as a patient.

6. Friends and Family

"Friends and family" pose a special challenge. These are the people who come with the patient to the doctor's office, or who pick up the phone when you call the patient's home.

Under HIPAA, friends and family, even spouses, are not entitled to the patient's PHI. Only the patient himself or herself has an absolute right to the PHI. The exception is parents of minor children or other legal guardians, who are generally to be treated for HIPAA purposes as if they were the patient, as noted above.

Having said this, HIPAA does permit some sharing of information with friends and family. HIPAA specifies that the Practice may, without written Authorization, disclose to a "family member, other relative, or a close personal friend of the [patient], or any other person identified by the [patient], the PHI directly relevant to such person's involvement with the [patient]'s care or payment related to the [patient's care]."

7. Patient Access to Chart

Except for psychotherapy notes, patients generally have the right to inspect and obtain a copy of their medical chart. Have the patient fill out the Practice's "Request for Access to Medical Information" form.

Generally, the Practice has thirty (30) days to comply with a request for access, or sixty (60) days if the information requested is not on-site.

8. Patient Amendment of Chart

The patient has a right to request an amendment to their medical record (so long as the Practice maintains it) if he or she believes it is incorrect or incomplete. To request an amendment, the patient should complete the Practice's form "Request to Amend Medical Information". The amendment must be dated and signed by the patient.

9. Incidental or Inadvertent Disclosures

HIPAA's prohibition against the disclosure of PHI could bring most medical practices to a standstill. For instance, the mere announcement of a patient's name in the waiting room is a disclosure of PHI. Overheard conversations and similar events are called "incidental disclosures." Under HIPAA, these are not violations provided the Practice has taken reasonable steps to safeguard PHI.

10. Faxes, Answering Machines, Messages, Email

HIPAA requires "reasonable safeguards" to avoid the disclosure of PHI. The Practice has established the following procedures to minimize the likelihood of HIPAA violations:

- Double-check fax numbers and use cover sheets for PHI.
- Leave only minimal information on voicemail or with family.
- Secure communication methods are preferred. Sensitive information should be encrypted or password-protected when possible.