

HIPAA Privacy Policy

THIS NOTICE DESCRIBES HOW WHOLE HEALTH KC MAY USE OR DISCLOSE MEDICAL INFORMATION ABOUT YOU AND HOW YOU MAY ACCESS THIS INFORMATION WE ENCOURAGE YOU TO CAREFULLY REVIEW THIS NOTICE so that you will understand our commitment to the privacy and protection of your MEDICAL information.

I. Introduction

Whole Health KC is a provider of clinical and therapeutic services. Whole Health KC is committed to protecting the confidentiality of individuals' medical and psychological information and other protected health information that we collect or create as part of our clinical and therapeutic activities. Except as permitted by law and as explained in this Notice, we do not disclose any information about our past, present or future patients to anyone.

This Privacy Policy notice describes the personal information we collect, and how and when we use or disclose that information. This Privacy Policy applies to all protected health information as that term is defined by federal law and regulations. Currently protected health information ("PHI") is defined as:

Information that is created or received by Whole Health KC and relates to the past, present or future physical or mental health or condition of a participant; the provision of health care to a participant; or the past, present or future payment for the provision of health care to a participant; and that identifies the participant or for which there is a reasonable basis to believe the information can be used to identify the participant. Protected health information includes information of persons living or deceased.

Our Privacy Obligations

We are required by law to maintain the privacy of your medical and health information (Protected Health Information or PHI) and to provide you with this Notice of our legal duties and privacy practices with respect to your Protected Health Information. Your PHI with Whole Health KC includes personal and medical information (such as your name, address, date of birth, test ordered, etc.) that we obtain from you and/or your physician or other health care practitioner. Your PHI also includes laboratory testing results. When we use or disclose your PHI, we are required to abide by the terms of this Notice (or other notice in effect at the time of the use or disclosure). Your other health care providers may have different notices regarding the use and disclosure of your PHI maintained by them.

Policies on Use and Disclosure of PHI.

Use and Disclosure Defined

Whole Health KC will use and disclose PHI only as permitted under HIPAA. The terms "use" and "disclosure" are defined as follows:

- **Use.** The sharing, employment, application, utilization, examination, or analysis of individually identifiable health information by any person working for Whole Health KC or by a Business Associate (defined below) of Whole Health KC.
- **Disclosure.** Disclosure means any release, transfer, provision of access to, or divulging in any other manner of individually identifiable health information to persons not employed by or working for Whole Health KC.

II. Permitted Uses and Disclosures

Whole Health KC will use or disclose your PHI for treatment, payment, or healthcare operations purposes and for other purposes permitted or required by law. The following categories describe different ways that we use and disclose your PHI. Please note that not every use or disclosure in a category will be listed. However, all of the ways we are permitted to use and disclose your PHI without your written authorization will fall within one of the categories listed below.

If we want to use or disclose your PHI for purposes that do not fall into at least one of these categories, we would have to obtain your written authorization first. You have the right to revoke your authorization at any time, except if we have already made a disclosure based on that authorization.

According to law, we do not need your authorization or permission to use or disclose your PHI for the following purposes:

1. **Treatment.** As health care providers. Whole Health KC might need to disclose your PHI to your physician and other authorized health care professionals who need access to your information because they are treating you.
2. **Payment.** Whole Health KC might disclose PHI in the process of obtaining payment for services that we provide to you. For example, our billing department may send your name, date of service, test performed, diagnosis code, and other information to a health plan or insurance company to obtain payment for services we provided. In some cases we may have to contact you to obtain billing information or for other billing purposes. When required, we may use an outside collection agency to obtain payment.
3. **Health Care Operations.** We may use and disclose PHI in the course of activities necessary to support you, to evaluate the quality of services and we may disclose PHI in order to resolve any complaints you may have and ensure that you have a pleasant visit with us.
4. **Disclosures to Business Associates.** We may disclose your PHI to other companies or individuals who need your PHI in order to provide specific services to us. These other entities, known as “business associates,” generally must comply with the terms of a contract designed to ensure that they will maintain the privacy and security of your PHI in the same manner that we do. For example, we may disclose your PHI to accrediting organizations that inspect and certify the quality of our services.
5. **Public Health Activities.** We may disclose your PHI to public health authorities for the purpose of preventing or controlling disease, injury or disability.
6. **Health Oversight Activities.** We may disclose your PHI to a health oversight agency that oversees the health care system or government benefit programs (such as Medicare or Medicaid).
7. **Threats to health or safety.** We may disclose your PHI as necessary to prevent a serious threat to your health and safety or that of another person or to the general public.
8. **Judicial and Administrative Proceedings.** We may disclose your PHI in the course of a judicial or administrative proceeding in response to a legal order, subpoena (under certain circumstances), order of either the Commissioner of Public Health or the Commissioner of Mental Health or other lawful process.
9. **Law Enforcement Officials.** We may disclose your PHI to the police or other law enforcement officials as required or permitted by law or in compliance with a court order or a grand jury or administrative subpoena.
10. **Research.** We may use or disclose your PHI for research purposes if an institutional Review Board/Privacy Board approves a waiver of authorization for such use or disclosure.
11. **Specialized Government Functions.** We may use and disclose your PHI to units of the government with special functions, such as the U.S. military or the U.S. Department of State under certain circumstances as required by law.
12. **As Required by Law.** We may use and disclose your PHI when required to do so by any other law not already referred to in the preceding categories.

III. The “Minimum-necessary” Standard

HIPAA requires that we, or our “business associate”, limit the amount of your PHI used or disclosed to the “minimum necessary” to accomplish the purpose of the use or disclosure. The “minimum-necessary” standard does not apply to any of the following:

- Uses or disclosures made by you;
- Uses or disclosures made pursuant to a valid authorization;
- Disclosures made to HHS;
- Uses or disclosures required by law; and
- Uses or disclosures required to comply with HIPAA.

IV. Disclosures of PHI Pursuant to an Authorization

We may disclose your PHI for any purpose you approve if your written authorization satisfies all of HIPAA’s requirements for a valid authorization. Any uses and disclosures we make pursuant to a signed authorization must be consistent with the terms and conditions of the authorization.

V. Legal Rights Related to Protected Health Information

The federal privacy rule, entitles you to request restrictions on our uses and disclosures of PHI for treatment, payment or health care operations purposes described above. We will consider each request but are not required to agree to any restrictions.

The federal privacy rule entitles you to request to receive confidential communications of PHI if disclosing this information by the usual means could endanger you. We will accommodate all reasonable requests, subject to the restrictions and capabilities of our information processing systems.

The federal privacy rule entitles you to request to receive an accounting of certain disclosures of your PHI made by Whole Health KC in the last six years, such as disclosure to health oversight agencies. These disclosures do not include disclosures made for purposes of treatment, payment or health care operations.

You have a right to request, in writing, to inspect and obtain a copy of PHI that we maintain about you that is included in what is called a “designated record set.” Additionally, when requesting information, you must reasonably describe the information you seek in your written request; and the information must be reasonably locatable and retrievable by us. We may charge you a fee to cover the cost of providing copies of this requested PHI.

You have the right to amend your PHI included in the designated record set. We may deny your request pursuant to those rules if we determine that our records are accurate and complete, if we determine that the information was not created by us, the information is not contained in our designated record set, or if access is otherwise restricted by law.

If you wish to exercise any of the legal rights described above, you must do so in writing. Contact Whole Health KC to obtain further information about these rights or if you would like to make such a request.

VI. Technical and Physical Safeguards

We have and will continue to implement reasonable technical and physical safeguards to prevent the PHI we maintain from being intentionally or unintentionally used or disclosed in violation of HIPAA’s requirements.

VII. Mitigation of Inadvertent Disclosures of Protected Health Information

Whole Health KC will mitigate, to the extent possible, any harmful effects that become known to it of a use or disclosure of an individual's PHI that violates this policy.

VIII. Workforce Training and Sanctions for Violations of Private Policy

Whole Health KC is trained to maintain the confidentiality of PHI that we collect or create as part of our clinical and therapeutic activities and require associates to certify that they have read and understand this Privacy Policy.

IX. No Intimidating or Retaliatory Acts; No Waiver of HIPAA Privacy

No individual may intimidate, threaten, coerce, discriminate against, or take other retaliatory actions against individuals for exercising their rights, filing a complaint, participating in an investigation, or opposing any improper practice under HIPAA. No individual will be required to waive his or her privacy rights under HIPAA as a condition of treatment.

In the event that you feel your rights or confidentiality have been violated, please contact either:

Adam Magers, MA

Phone: (816) 945-2478

E-mail: adam@wholehealthkc.com

or,

Whitney Logan, MA, LPC

Phone: (773) 331-0517

Email: whitney@wholehealthkc.com

*Amendments

Whole Health KC reserves the right to amend or change this Policy at any time (and even retroactively) without notice. If we change this Policy, we may make the new Policy effective for all PHIs that we maintain, including any information created or received prior to issuing the new Policy. You may obtain a revised Policy by contacting Whole Health KC. This Policy does not address requirements under other federal laws or under state laws.

Effective date: November 17, 2019

Updated: February 1, 2020