



Sara Holden, LCPC  
3350 Americana Terrace Blvd #100C  
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## **WEB COPY OF DEEP VALLEY WELLNESS' PRIVACY POLICIES**

The purpose of this notice and consent form is to describe how health information may be used and disclosed by Deep Valley Wellness, and how you, the client, or parent/legal guardian of the client, can get access to this information. Please review it carefully and ask me any questions you may have.

### **PLEDGE REGARDING HEALTH INFORMATION:**

Deep Valley Wellness is aware and understands that health information about you and your healthcare is personal, and is committed to protecting the health information you share with Deep Valley Wellness. Deep Valley Wellness creates a record of the care and services you receive with the company. SimplePractice, a HIPAA compliant software, is used to create and manage electronic medical records. These files contain a copy of this intake paperwork, insurance and billing information, session(s) documentation, assessments, medical records provided by other providers, and any medical releases of information you have signed. This record is needed to provide you with quality care and to comply with certain legal and ethical requirements. AAs if you have any questions about how your file is kept secure. This notice applies to all of the records of your care generated by Deep Valley Wellness. This notice will tell you about the ways in which Deep Valley Wellness may use and disclose health information about you, your rights to the health information, and certain obligations regarding the use and disclosure of your health information.

Sara Holden, LCPC at Deep Valley Wellness, LLC is required by law to:

- Make sure that protected health information (“PHI”) that identifies you is kept private.
- Give you this notice of my legal duties and privacy practices with respect to health information.
- Follow the terms of the notice that is currently in effect.
- Deep Valley Wellness can change the terms of this Notice, and such changes will apply to all the information I have about you. The new Notice will be available upon request in the office and in your patient portal.

### **HOW I MAY USE AND DISCLOSE HEALTH INFORMATION ABOUT YOU:**

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The following categories describes different ways in which Deep Valley Wellness uses and discloses health information. Not every use or disclosure in a category will be listed.

If you choose to utilize your health insurance coverage for mental health services, Deep Valley Wellness will be required to disclose some of your PHI to your insurance company, including but not limited to, demographic information and mental health diagnoses in order to bill them. Deep Valley Wellness may be contacted by a Care Advocate or other representative from your insurance company. Care Advocates often result in a request for more information regarding member's care including, but not limited to: confirmation of the correct level of care, ensure services being provided are medically necessary, document that the counselor is aware of any personal safety or medical risk factors, etc. Please see my insurance standards and policies listed in Deep Valley Wellness' Practice Policies an Informed Consent Form.

For Treatment Payment, or Health Care Operations: Federal privacy rules (regulations) allow health care providers who have direct treatment relationship with the patient/client to use or disclose the patient/client's personal health information without the patient's written authorization, to carry out the health care provider's own treatment, payment or health care operations. I may also disclose your protected health information for the treatment activities of any health care provider. This too can be done without your written authorization. Some cases may be discussed in a professional consultation in order to ensure you are receiving the best possible care. These cases will be discussed with non-identifying information, unless you have given consent. The consultants are legally and professionally bound to keep all information confidential.

Disclosures for treatment purposes are not limited to the minimum necessary standard. Because therapists and other health care providers need access to the full record and/or full and complete information in order to provide quality care. The word "treatment" includes, among other things, the coordination and management of health care providers with a third party, consultations between health care providers and referrals of a patient for healthcare from one health care provider to another.

Lawsuits and Disputes: If you are involved in a lawsuit, Sara Holden/Deep Valley Wellness may disclose health information in response to a court or administrative order. Sara Holden/Deep Valley Wellness may also disclose health information about your minor child in response to a subpoena, discovery request, or other lawful process by someone else involved in the dispute, but only if efforts have been made to tell you about the request or to obtain an order protecting

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the information requested. Please see the legal proceedings policies listed in Deep Valley Wellness' Practice Policies and Informed Consent Form.

#### CERTAIN USES AND DISCLOSURES:

1. Psychotherapy Notes: Sara Holden keeps "psychotherapy notes" as that term is defined in 45 CFR § 164.501, and any use or disclosure of such notes requires your authorization unless the use or disclosure is:
  - a. For Sara Holden's use in treating you.
  - b. For Sara Holden's use in defending herself and/or Deep Valley Wellness in legal proceedings
  - c. For Sara Holden's use in defending herself and/or Deep Valley Wellness in ethical/board complaints
  - d. For use by the Secretary of Health and Human Services to investigate Sara Holden and/or Deep Valley Wellness' compliance with HIPAA.
  - e. Required by law and the use or disclosure is limited to the requirements of such law.
  - f. Required by law for certain health oversight activities pertaining to the originator of the psychotherapy notes.
  - g. Required by a coroner who is performing duties authorized by law.
  - h. Required to help avert a serious threat to the health and safety of others

As a Licensed Clinical Profession Counselor, Sara Holden will not use or disclose your PHI for marketing purposes. Sara Holden will not sell your PHI in the regular course of business.

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**CERTAIN USES AND DISCLOSURES DO NOT REQUIRE YOUR AUTHORIZATION:**

Subject to certain limitations in the law, Sara Holden can use and disclose your PHI without your authorization for the following reasons:

1. When disclosure is required by state or federal law, and the use or disclosure complies with and is limited to the relevant requirements of such law.
2. For public health activities, including reporting suspected child, elder, or dependent adult abuse, or preventing or reducing a serious threat to anyone's health or safety.
3. For health oversight activities, including audits and investigations.
4. For judicial and administrative proceedings, including responding to a court or administrative order, although my preference is to obtain an Authorization from you before doing so.
5. For law enforcement purposes, including reporting crimes occurring on my premises.
6. To coroners or medical examiners, when such individuals are performing duties authorized by law.
7. Specialized government functions, including, ensuring the proper execution of military missions; protecting the President of the United States; conducting intelligence or counter-intelligence operations; or, helping to ensure the safety of those working within or housed in correctional institutions.
8. For workers' compensation purposes, in order to comply with workers' compensation laws.
9. Appointment reminders and health related benefits or services. Sara Holden may use and disclose your PHI to remind you that you have an appointment. Sara Holden may

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also use and disclose your PHI to tell you about treatment alternatives, referrals to outside services or providers, or other health care services or benefits that I offer.

10. If you have tested positive for COVID-19 or its variants, Deep Valley Wellness may be required to notify health authorities that you have been in the office. Please see COVID-19 policies listed in Deep Valley Wellness' In-Person Informed Consent.

11. In the event of nonpayment of services, Deep Valley Wellness may disclose your PHI in order to utilize a third-party collection agency or file legal proceedings.

12. In the event that you dispute a financial charge/transaction on your account, Deep Valley Wellness may disclose your information to all necessary banking institutions in order to defend the financial transaction.

13. For minor clients, Deep Valley Wellness may be required to release medical records and/or disclose PHI to parents/guardians per Idaho Code 32-1015.

#### CERTAIN USES AND DISCLOSURES REQUIRE YOU TO HAVE THE OPPORTUNITY TO OBJECT:

Disclosures to family, friends, or others. Sara Holden may provide your PHI to a family member, friend, or other person that you indicate is involved in your care or the payment for your health care. For adults, Sara Holden will obtain a release of information from you before communicating any PHI. Without a release of information, Sara Holden will only release PHI to your emergency contact in the event of a true emergency. The opportunity to consent may be obtained retroactively in emergency situations.

#### YOU HAVE THE FOLLOWING RIGHTS WITH RESPECT TO YOUR PHI:

1. The Right to Request Limits on Uses and Disclosures of Your PHI. You have the right to ask Sara Holden not to use or disclose certain PHI for treatment, payment, or health care operations purposes. Sara Holden is not required to agree to your request, and may say "no" if it is believed it would affect your health care.

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2. The Right to Request Restrictions for Out-of-Pocket Expenses Paid for In Full. You have the right to request restrictions on disclosures of your PHI to health plans for payment or health care operations purposes if the PHI pertains solely to a health care item or a health care service that you have paid for out-of-pocket in full.
3. The Right to Choose How Sara Holden Sends PHI to You. You have the right to ask Sara Holden to contact you in a specific way. For example, you designate whether you prefer contact via home or office phone, text messaging or voicemail, or to send mail to a different address. Sara Holden will agree to reasonable requests.
4. The Right to See and Get Copies of Your PHI. You have the right to get an electronic or paper copy of your medical record. Sara Holden will provide you with a copy of your record or summary of it, if you agree to receive a summary, within 30 days of receiving your written request. Requests to receive copies of medical records and/or summaries are billed at \$30 per 15-minute increments of time fulfilling your records request.
5. The Right to Get a List of the Disclosures Sara Holden Has Made. You have the right to request a list of instances in which Sara Holden has disclosed your PHI for purposes other than treatment, payment, or health care operations, or for which you provided me with an Authorization. Sara Holden will respond to your request for an accounting of disclosures within 60 days of receiving your request.
6. The Right to Correct or Update Your PHI. If you believe that there is a mistake in your PHI, or that a piece of important information is missing from your PHI, you have the right to request that Sara Holden correct the existing information or add the missing information. Sara Holden may say “no” to your request, but will tell you why in writing within 60 days of receiving your request.
7. The Right to Get a Paper or Electronic Copy of this Notice. An electronic copy of this form will be available on your SimplePractice Patient Portal. You have the right get a paper copy of this Notice, and you have the right to get a copy of this notice by e-mail.

Acknowledgement of Receipt of Privacy Notice:

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Under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), you have certain rights regarding the use and disclosure of your protected health information. By checking the box below, you are acknowledging that you have received a copy of Deep Valley Wellness' Privacy Policies.

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