

# **NOTICE OF PRIVACY PRACTICES (HIPAA)**

## **Compassion Centered Counseling**

**Effective Date: January 1, 2026**

1698 Keller Parkway, Ste 200

Keller, Texas 76248

Phone: 817-666-3067

Email: marcyconner@compassioncentered.com

Privacy Officer: Marcy Conner, M.Ed., LPC-S

## **Your Information. Your Rights. Our Responsibilities.**

**This Notice describes how your medical and mental health information may be used and disclosed, and how you can get access to this information. Please review it carefully.**

### **I. Your Rights**

**You have the right to:**

#### **1. Get an electronic or paper copy of your medical record**

- **You may request to see or obtain a copy of your records.**
- We will provide a copy or summary within **15 days**, as required by Texas law.
- A reasonable, cost-based fee may apply.

#### **2. Request corrections to your record**

- You may request amendments if you believe information is incomplete or incorrect.
- We may deny the request, but we will explain why in writing.

#### **3. Request confidential communication**

- You may request communication by alternate means (e.g., phone, email, mailing address).
- We will honor reasonable requests.

#### **4. Ask us to restrict what we use or share**

- You may ask us not to use or share certain health information for treatment, payment, or operations.
- We are not required to agree, but we will consider your request.
- If you pay fully out-of-pocket for a service, we must restrict disclosure of that service to your insurance company.

#### **5. Receive a list of disclosures**

- You may request an accounting of disclosures for up to six years.

- We will include all disclosures except those related to treatment, payment, or health care operations.

## **6. Get a copy of this Notice**

You may request a paper or electronic copy at any time.

## **7. Choose someone to act for you**

If someone has medical power of attorney or is your legal guardian, we will treat them as authorized to act on your behalf.

## **8. File a complaint if you feel your rights are violated**

You may file a complaint with:

**Compassion Centered Counseling Privacy Officer:**

marcyconner@compassioncentered.com

**U.S. Department of Health & Human Services – Office for Civil Rights:**

**No retaliation** will occur for filing a complaint.

## **II. How We Use and Share Your Information**

We typically use or share your information in the following ways:

### **1. Treatment**

We use your information to provide and coordinate your mental health care.

*Example: Sharing information with other providers involved in your treatment.*

### **2. Payment**

We use your information to bill and obtain payment from insurance companies.

*Example: Sending diagnoses and session dates to your insurer.*

### **3. Health care operations**

We use your information to operate and improve our practice.

*Example: Quality improvement, training, or compliance activities.*

## **Other Uses and Disclosures**

We may also share information in these situations:

### **1. Required by law**

We disclose information when required by federal or Texas law.

## **2. Public health and safety**

We may share information to:

- Prevent or report abuse, neglect, or exploitation
- Respond to court orders or subpoenas
- Assist with law enforcement investigations
- Reduce a serious and immediate threat to health or safety

*Note: Texas law requires reporting suspected child abuse, abuse of elderly/disabled persons, and threats of serious harm.*

## **3. Mental health emergencies**

We may share information when necessary to prevent harm to self or others.

## **4. With your written authorization**

We will never share the following without your signed consent:

- Psychotherapy notes
- Marketing communications
- Sale of your information

You may revoke an authorization at any time.

## **III. Our Responsibilities**

We must:

- Maintain the privacy and security of your Protected Health Information (PHI).
- Notify you promptly if a breach occurs that may compromise your privacy.
- Provide you with a copy of this Notice and follow its terms.
- Only use or disclose your information as described in this Notice unless you authorize otherwise.

We reserve the right to update this Notice at any time. If updated, the new version will be available on our website and in our office, and its terms will apply to all information we maintain.

## **IV. Telehealth and Electronic Communication**

Compassion Centered Counseling provides telehealth via **TherapyNotes** and **Doxy.me**, both HIPAA-compliant platforms.

Please note:

- Electronic communication may have privacy risks despite safeguards.
- Clients are responsible for choosing a private, secure location for telehealth sessions.

## **V. Contact Information**

If you have questions or wish to exercise your rights under HIPAA, contact:

**Marcy Conner, M.Ed., LPC-S**

Privacy Officer

Email: [marcyconner@compassioncentered.com](mailto:marcyconner@compassioncentered.com)

Phone: 817-666-3067