

ROOTED PERSPECTIVES COUNSELING, PLLC

Telehealth practice serving clients throughout Texas

McKinney, Texas 75071

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NOTICE OF PRIVACY PRACTICES

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.

Effective Date: October 6, 2026

Your Information. Your Rights. Our Responsibilities.

This Notice describes the privacy practices of Rooted Perspectives Counseling, PLLC (“the Practice”) and applies to protected health information (“PHI”) created or maintained in connection with your care. It explains how your health information may be used or disclosed, your rights regarding that information, and the Practice’s responsibilities.

Your Rights

- **Get a copy of your record.** You may ask to inspect or receive an electronic or paper copy of your health record and other PHI maintained by the Practice. In most circumstances, the Practice will provide access within the time required by law and may charge a reasonable, cost-based fee when permitted.
- **Ask to correct your record.** If you believe information in your record is incorrect or incomplete, you may ask the Practice to amend it. The Practice may deny the request in certain circumstances and will explain a denial in writing.
- **Request confidential communications.** You may ask the Practice to contact you in a specific way or at a different address. Reasonable requests will be honored.
- **Ask for limits on uses or disclosures.** You may ask the Practice not to use or disclose certain PHI for treatment, payment, or health care operations. The Practice is not required to agree to every request. If you pay for a service in full out of pocket and ask that information about that service not be disclosed to a health plan for payment or health care operations, the Practice will honor the request when required by law.
- **Get an accounting of certain disclosures.** You may ask for a list of certain disclosures of your PHI made during the period allowed by law. The first accounting in a 12-month period is generally provided without charge; a reasonable cost-based fee may apply to additional requests.
- **Get a copy of this Notice.** You may request a paper or electronic copy of this Notice at any time, even if you previously agreed to receive it electronically.
- **Choose someone to act for you.** If a person has legal authority to act on your behalf, such as a legal guardian or a person with applicable health care power of attorney, the Practice will recognize that person’s rights as required by law.
- **File a complaint.** You may complain to the Practice or to the U.S. Department of Health and Human Services Office for Civil Rights if you believe your privacy rights have been violated. The Practice will not retaliate against you for filing a complaint.

Your Choices

For certain health information, you may tell the Practice your preferences about what is shared. For example, you may tell the Practice whether information may be shared with a family member, friend, or another person involved in your care or payment for your care. If you are unable to communicate your preference, the Practice may share information when permitted by law and when it is believed to be in your best interest.

Uses or disclosures of psychotherapy notes, when those notes meet the HIPAA definition, generally require your written authorization except in limited circumstances permitted by law. The Practice will not sell your PHI. Uses of PHI for marketing that require authorization will not occur without your written authorization.

How the Practice May Use and Disclose Your Information

- **Treatment.** The Practice may use your PHI and share it with other health care professionals as permitted by law to provide, coordinate, or manage your care. For example, with applicable permission or when otherwise legally permitted, information may be used in consultation or coordination with another treating provider.
- **Payment.** The Practice may use and disclose PHI to bill for services, collect payment, process electronic payments, or communicate with a health plan or other payer when applicable.
- **Health care operations.** The Practice may use and disclose PHI as needed to operate the practice, support quality of care, conduct appropriate clinical consultation or supervision, manage records, schedule appointments, and perform administrative functions.
- **Appointment reminders and service communications.** The Practice may contact you about appointments, scheduling, billing, treatment alternatives, or health-related services offered by the Practice.
- **Business associates.** The Practice may use vendors or service providers that perform functions involving PHI. When required, those vendors are subject to written agreements requiring appropriate safeguards for PHI.
- **Required or permitted by law.** The Practice may use or disclose PHI when required or permitted by federal or Texas law, including certain public health and health oversight activities, reports of suspected abuse or neglect when legally required, judicial or administrative proceedings, law-enforcement purposes permitted by law, workers' compensation matters, and efforts to prevent or lessen a serious and imminent threat to health or safety.
- **Other legally permitted purposes.** PHI may also be disclosed for other purposes specifically permitted by law, such as certain functions involving coroners or medical examiners, specialized government functions, or research when all applicable legal requirements are satisfied.

Substance Use Disorder Records Protected by 42 CFR Part 2

If the Practice receives, creates, or maintains substance use disorder patient records that are protected by 42 CFR Part 2, those records receive the additional protections required by federal law. Uses and disclosures of Part 2 records will be handled in accordance with applicable Part 2 requirements. Part 2 records will not be used or disclosed in civil, criminal, administrative, or legislative proceedings against you unless permitted by applicable law and supported by the required consent or court order. If fundraising communications would use Part 2 information, you will receive the notice and choice required by law.

Texas Law and Mental Health Records

Mental health information may also be protected by Texas law. When Texas law provides greater privacy protection than federal law, the Practice will follow the more protective requirement to the extent it applies. Nothing in this Notice is intended to reduce rights or protections available to you under applicable Texas law.

The Practice's Responsibilities

- Maintain the privacy and security of your PHI as required by law.
- Provide you with this Notice describing legal duties and privacy practices.
- Follow the duties and privacy practices described in the Notice currently in effect.
- Notify you as required by law if a breach occurs that may have compromised the privacy or security of your information.
- Not use or disclose your information in a way that is not described in this Notice unless you authorize it in writing or the law otherwise permits or requires it. You may revoke an authorization in writing, subject to actions already taken in reliance on it.

Telehealth, Electronic Records, and Communications

The Practice provides telehealth services and uses electronic systems to support scheduling, documentation, billing, client communications, and other practice operations. Reasonable administrative, technical, and physical safeguards are used to protect PHI. You may request reasonable alternative methods of communication if you have privacy concerns.

Changes to This Notice

The Practice may change the terms of this Notice, and the revised terms may apply to all PHI maintained by the Practice. A current Notice will be available upon request and will be posted on the Practice website when required.

Questions or Complaints

For questions about this Notice, requests concerning your privacy rights, or complaints about the Practice's privacy practices, contact:

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Privacy Contact, Rooted Perspectives Counseling, PLLC

McKinney, Texas 75071

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Phone: (469) 772-0005

You may also file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights. Information about filing a complaint is available at [HHS.gov/ocr/privacy/hipaa/complaints](https://www.hhs.gov/ocr/privacy/hipaa/complaints). The Practice will not retaliate against you for filing a complaint.

Acknowledgment of Receipt

You will be asked to acknowledge that you received or were offered this Notice of Privacy Practices. Your acknowledgment does not authorize any special use or disclosure of your health information and does not waive any privacy right.