



Notice of Privacy Practices

Effective September 13, 2026

YOUR INFORMATION. YOUR RIGHTS. OUR RESPONSIBILITIES.

This notice describes how medical information about you may be used and disclosed, how you can get access to this information, and your rights regarding your protected health information. Please review it carefully.

Your Rights

You have the right to:

- Inspect or obtain a paper or electronic copy of your health record, subject to applicable law.
- Ask us to correct health information you believe is incorrect or incomplete.
- Request confidential communications or ask us to contact you in a specific way or at a specific location.
- Ask us to limit certain uses or disclosures of your information. We are not always required to agree, except in circumstances required by law.
- Request an accounting of certain disclosures of your health information.
- Receive a paper copy of this notice at any time, even if you agreed to receive it electronically.
- Choose someone legally authorized to act for you.
- File a complaint if you believe your privacy rights have been violated.

Your Choices

For certain health information, you may tell us your preferences about what we share. If you have a clear preference, tell us and we will follow your instructions when the law allows.

- You may tell us whether and how we may share relevant information with family members, friends, or others involved in your care or payment for your care.
- Certain uses and disclosures require your written authorization. When authorization is required, you may revoke it in writing, except to the extent we have already acted in reliance on it.
- Most uses or disclosures of psychotherapy notes, uses for marketing, and sales of protected health information require written authorization, subject to limited exceptions permitted by law.

How We May Use and Share Your Information

We may use or disclose protected health information as permitted or required by law, including for:

- Treatment - to provide, coordinate, or manage your care and, when appropriate, communicate with other health care professionals involved in your treatment.
- Payment - to bill for services, obtain payment, verify coverage, and communicate with health plans as permitted by law.

- Health care operations - for activities such as quality improvement, practice administration, consultation, compliance, auditing, legal services, and other lawful operations.
- Public health, safety, and oversight activities when disclosure is permitted or required by law.
- Mandatory reports and other disclosures required by federal or Pennsylvania law.
- Judicial, administrative, or law-enforcement matters when a valid legal requirement applies.
- Preventing or reducing a serious threat to health or safety when disclosure is permitted by law.

Mental Health, Psychotherapy Notes & Substance Use Disorder Records

Mental health information may receive additional protection under Pennsylvania or federal law. When another law gives your information greater protection than HIPAA, we will follow the more protective rule.

Psychotherapy notes receive special protection under HIPAA. In most situations, we will obtain your written authorization before using or disclosing psychotherapy notes when authorization is required by law.

If we create, receive, or maintain records protected by 42 CFR Part 2 relating to substance use disorder treatment, those records are subject to additional federal protections. Uses and disclosures of Part 2 records will follow the consent, redisclosure, and other requirements that apply to those records.

Our Responsibilities

- We are required by law to maintain the privacy and security of your protected health information.
- We will notify you promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in the notice currently in effect.
- We will not use or disclose your information other than as described here unless you authorize us in writing or another law permits or requires it.

Changes to This Notice

We may change the terms of this notice, and changes may apply to all information we maintain. The current notice will be available upon request, in the practice, and on our website.

Questions, Requests or Complaints

For questions about this notice, privacy requests, or concerns, contact:

Privacy Contact	Breanne Finagan, LCSW
Phone	570-212-9875
Email	bre@breannefinagancounseling.com
Website	https://breannefinagancounseling.com
Client Portal	https://www.therapyportal.com/p/breanne18644/

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 <https://www.hhs.gov/ocr/privacy/hipaa/complaints/>. We will not retaliate against you for filing a complaint.

Availability of This Notice

A current copy of this Notice of Privacy Practices is available upon request and on the practice website. You may request a paper copy at any time.