

CLIENT RIGHTS

Right to request how we contact you

It is normal practice to communicate with you at your home address and daytime phone number you gave us when you scheduled your appointment, about health matters, such as appointment reminders etc. Sometimes your therapist may leave messages on your voicemail. Your therapist may also contact you via text or email to remind you of scheduled appointments or for billing purposes if you chose to provide me with the appropriate contact information. You have the right to request that your therapist communicate with you in a different way.

Right to release your medical records

You may consent in writing to release your records to others. You have the right to revoke this authorization, in writing, at any time. However, a revocation is not valid to the extent that we acted in reliance on such authorization

Right to inspect and copy your medical and billing records.

You have the right to inspect and obtain a copy of your information contained in our medical records. We request that you do so in writing. Under limited circumstances you may be denied your request to inspect and copy for reasons that might be counter-therapeutic to your treatment needs. You will receive a written notification if your request is declined. If you ask for a copy of any information, you may be charged a reasonable fee for the costs of copying, mailing and supplies.

Right to add information or amend your medical records.

If you feel that information contained in your medical record is incorrect or incomplete, you may ask for your therapist to add information to amend the record. We will make a decision on your request with 60 days, or some cases within 90 days. Under certain circumstances, we may deny your request to add or amend information. If we deny your request, you have a right to file a statement that you disagree. Your statement and my response will be added to your record. To request an amendment, we request that you do so in writing to provide an explanation concerning the reason for your request.

Right to an accounting of disclosures.

You may request an accounting of any disclosures, if any, your therapist has made related to your medical information, except for information used for treatment, payment, or health care operational purposes or that your therapist shared with you or your family, or information that you gave us specific consent to release. It also excludes information we were required to release. To receive information regarding disclosure made for a specific time period no longer than six years, please submit your request in writing. Your therapist will notify you of the cost involved in preparing this list.

Right to request restrictions on uses and disclosures of your health information.

You have the right to ask for restrictions on certain uses and disclosures of your health information. This request must be submitted in writing. However, your therapist may not be able to comply with a request if it violates Ohio state law.

Right to complain.

If you believe your privacy rights have been violated, please contact your therapist, and discuss your concerns. If you are not satisfied with the outcome, you may discuss with or file a written complaint with the owner of Keep Moving Forward Counseling & Consulting LLC. If you are not satisfied with that outcome, you may file a written complaint with the U.S. Department of Health and Human Services. An individual will not be retaliated against for filing such a complaint.

Right to receive changes in policy.

You have the right to receive any future policy changes secondary to changes in state and federal laws.