

Example of Notice of Privacy Practices

Dimensional Wellness Notice of Privacy Practices

Effective Date: March 21, 2024

I. Introduction

Welcome to The Lotus Center LLC DBA Dimensional Wellness where your privacy is our priority. This Notice of Privacy Practices explains how your protected health information (PHI) may be used and disclosed, and how you can access this information. Please review this notice carefully.

II. Our Commitment to Your Privacy

As a mental health therapist, we are committed to maintaining the privacy of your personal and health information. We are required by law to provide you with this Notice of Privacy Practices that explains our legal duties and privacy practices concerning your PHI.

III. Uses and Disclosures of Your Protected Health Information

We may use and disclose your PHI for the following purposes:

Treatment: We may use your PHI to provide, coordinate, or manage your mental health care and related services.

Payment: We may use and disclose your PHI for billing and payment purposes, including working with your insurance company or other third-party payer.

Healthcare Operations: We may use and disclose your PHI for necessary healthcare operations, such as quality improvement activities, training, and business management.

Authorization: We will obtain your written authorization before using or disclosing your PHI for purposes other than those listed in this Notice.

Legal Requirements: We may disclose your PHI when required by law, such as in response to a court order or other legal process.

IV. Your Rights Regarding Your Protected Health Information

You have the following rights regarding your PHI:

Right to Inspect and Copy: You have the right to inspect and copy your PHI.

Right to Amend: You have the right to request an amendment to your PHI if you believe it is inaccurate or incomplete.

Right to Request Restrictions: You have the right to request restrictions on certain uses and disclosures of your PHI.

Right to Request Confidential Communications: You have the right to request confidential communication of your PHI.

Right to a Paper Copy: You have the right to obtain a paper copy of this Notice upon request.

V. Complaints

If you believe your privacy rights have been violated, you may file a complaint with Dimensional Wellness or with the Secretary of the Department of Health and Human Services.

VI. Contact Information

For further information about this Notice or to exercise your rights, please contact:

Dr. Tina Vitolo, DSW, LCSW, QS
6586 W. Atlantic Avenue #1035
Delray Beach, FL 33446
tina@atransformativejourney.com

VII. Changes to this Notice

We reserve the right to change this Notice. The revised Notice will be effective for information we already have about you as well as any information we receive in the future. We will provide a copy of the revised Notice upon request.

Thank you for choosing Dimensional Wellness for your mental health care needs. We are dedicated to protecting your privacy and providing you with quality care.

Sincerely,

Dr. Tina Vitolo, DSW, LCSW, QS
Owner and CEO
Dimensional Wellness