# Deann M. Gattis, Ph.D.

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# NOTICE OF PSYCHOLOGIST'S POLICIES AND PRACTICES TO PROTECT THE PRIVACY OF YOUR HEALTH INFORMATION

THIS NOTICE DESCRIBES HOW PSYCHOLOGICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

# I. <u>Uses and Disclosures for Treatment, Payment and Health Care Operations</u>

I may use or disclose your protected health information (PHI), for treatment, payment and health care operations purposes with your consent. To help clarify these terms, here are some definitions:

- o "PHI" refers to information in your health record that could identify you.
- o "Treatment, Payment and Health Care Operations" (TPO)
  - o Treatment is when I provide, coordinate or manage your health care and other services related to your health care. An example of treatment would be when I consult with another health care provider, such as family physician, psychologist or psychiatrist.
  - Payment is when I obtain reimbursement for your heath care. Examples of payment are when I disclose your PHI to your health insurer or my billing service to obtain reimbursement for your health care or to determine eligibility or coverage.
  - Health Care Operations are activities that relate to the performance and operation of my practice. Examples of health care operations are quality assessment and improvement activities, business-related matters such as audits and administrative services, and case management and care coordination and reviewing the competence or qualifications of health care professionals.
- o "Use" applies only to activities within my office, such as sharing, employing, applying, utilizing, examining and analyzing information that identifies you.
- O "Disclosure" applies to activities outside of my office, such as releasing, transferring, or providing access to information about you to other parties.

#### II. Uses and Disclosures Requiring Authorization

I may use or disclose PHI for purposes outside of treatment, payment, and health care operations when your appropriate authorization is obtained. An "authorization" is written permission above and beyond the general consent that permits only specific disclosures. In those instances when I am asked for information for purposes outside of treatment, payment and health care operations, I will obtain an authorization from you before releasing this information. I will also need to obtain an authorization before releasing your psychotherapy notes. "Psychotherapy notes" are notes I have made about our conversation during a private, group, joint, or family counseling session, which are kept separate from the rest of your medical record. These notes are given a greater degree of protection that PHI.

You may revoke all such authorizations (of PHI or psychotherapy notes) at any time, provided each revocation is in writing. You may not revoke an authorization to the extent that (1) I have relied on that authorization; or (2) if the authorization was obtained as a condition of obtaining insurance coverage, and the law provides the insurer the right to contest the claim under the policy.

It should be clearly understood the consents for the Use and Disclosure of PHI does not allow Deann M. Gattis, Ph.D. to disclose PHI for any reasons other than for TPO. For Deann M. Gattis, Ph.D. to use and disclose PHI for purposes other than than for treatment, payment and health care operations, see Policy for Uses and Disclosures of PHI based on Patient Authorizations and Policy Uses and Disclosures of Public Health and Safety.

#### III. Uses and Disclosures with Neither Consent Nor Authorization

I may use or disclose PHI without your consent or authorization in the following circumstances;

- O Child Abuse and Neglect: If I treat a child who appears to be the victim of physical, sexual, or emotional abuse or neglect, I MUST report such to the nearest law enforcement agency or child welfare. If a child is a witness to domestic violence and this appears to be a cause of emotional abuse, I am likewise obligated by law to report this. Also, if an adult client discloses that they have abused or neglected a child, I MUST report this to law enforcement ro child welfare as well. I am legally obligated to make such reports.
- o Adult and Domestic Abuse: If I have reason to believe that a vulnerable adult (defined below) is suffering from abuse, neglect or exploitation, I am required by law to make a report to either the Oklahoma Department of Human Services, the district attorney's office, or the municipal; police department as soon as I become aware of the situation.
  - A "vulnerable adult" means an individual who is an incapacitated person or who, because of physical or mental disability, incapability, or other disability, is substantially impaired in the ability to provide adequately for the care or custody of him or herself, or is unable to manage his or her property and financial affairs effectively, or to meet essential requirements for mental or physical health or safety, or to protect him or herself from abuse, neglect, or exploitation without assistance from others.
- Health Oversight: If you file a disciplinary complaint with the Oklahoma State Board of Examiners of Psychologists or the Licensed Professional Counselor Board, they would have the right to view your relevant confidential information as part of the proceedings.
- o Judicial or Administrative Proceedings: If you are involved in a court proceeding and a request is made for information about your diagnosis and treatment and the records thereof, such information is privileged under state law, and I will not release the information without written authorization from you or your personal or legally appointed representative, or a court order. The privilege does not apply when you are being evaluated for a third party or where the evaluation is court ordered. You will be informed in advance if this is the case.
- o Serious Threat to Health or Safety: If you communicate to me and explicit threat to kill or inflict serious bodily injury to yourself or to kill or inflict serious bodily injury upon a reasonably identifiable person, and you have the apparent intent and ability to carry out that threat, I have the legal duty to take reasonable precautions. These precautions may include, but are not limited to, disclosing relevant information from your mental health records, which is essential to protect the rights and safety of others. I also have such a duty if you have a history of physical violence of which I am aware, and I have a reason to believe there is a clear and imminent danger that you will attempt to kill or inflict serious bodily injury upon a reasonably identifiable person.
- o Worker's Compensation: If you file a worker's compensation claim, you will be giving permission for the Administrator of the Worker's Compensation Court, the Oklahoma Insurance Commissioner, the Attorney General, a district attorney (or a designee for any of these) to examine your records relating to the claim.

#### IV. Patient's Rights and Psychologist's Duties

#### Patient's Rights

- o Right to Request Restrictions: You have the right to request restrictions on certain uses and disclosures of protected health information about you. However, I am not required to agree to restrictions you request.
- Right to Receive Confidential communications by Alternate means and at Alternate Locations: You have the right to request and receive confidential communications of Protected Health Information by alternative means or alternative locations (i.e., you may not want a family member to know you are being treated in my practice and may request we send bills to a different address).
- o Right to Inspect and Copy: You have the right to inspect and/or copy of your Protected Health Information in my mental health and billing records used to make decisions about you for as long as the information is maintained in the record. I may deny your access under certain circumstances, but in some cases you may have this decision reviewed. On your request, I will discuss with you the details of the request and denial process.
- o Right to Amend: You have the right to request an amendment of your Personal Health Information for as long as information is in your record. I may deny your request. On your request, I will discuss with you the details of the amendment process.
- o Right to an Accounting of Disclosure: You generally have the right to receive an accounting of disclosures of your Protected Health Information. On your request, I will discuss with you the details of the accounting process.
- o Right to a Paper Copy: You have the right to obtain a paper copy of this notice from me upon request.

### Psychologist's Duties:

- o I am required by law to maintain the privacy of Protected Health Information and to provide you with a notice of my legal duties and privacy practices with respect to Protected Health Information.
- o I reserve the right to change the privacy policies and practices described in this notice. Unless I notify you of such changes, however, I am required to abide by the terms currently in effect.
- o If I revise the policies and procedures, I will have a current copy available at my office.

## V. Digital/Social Media Policy

#### Friending

- o I do not accept friend or contact requests from current or former clients on any social networking site (Facebook, LinkedIn, etc).
- I believe that adding clients as friends or contacts on these sites can compromise your confidentiality and our respective privacy. It may also blur the boundaries of our therapeutic relationship.
- o If you have questions about this, please bring them up when we meet and we can talk more about it.

#### Interacting

- Please do not use SMS (mobile phone text messaging) or messaging on Social Networking sites such as Twitter, Facebook, or LinkedIn to contact me. These sites are not secure and I may not read these messages in a timely fashion.
- o Do not use Wall postings, @replies, or other means of engaging with me in public online if we have an already established client/therapist relationship.
- o Engaging with me this way could compromise your confidentiality.
- o It may also create the possibility that these exchanges become a part of your legal medical record and will need to be documented and archived in your chart.
- o If you need to contact me between sessions, the best way to do so is by phone. Direct email at drdgattis [at]DrDGattis [dot com] is second best for quick, administrative issues. See the email section below for more information regarding email interactions.

## Use of Search Engines

- o It is NOT a regular part of my practice to search for clients on Google or Facebook or other search engines.
- Extremely rare exceptions may be made during times of crisis. If I have a reason to suspect that you are in danger and you have not been in touch with me via our usual means (coming to appointments, phone, or email) there might be an instance in which using a search engine (to find you, find someone close to you, or to check on your recent status updates) becomes necessary as part of ensuring your welfare.
- o These are unusual situations and if I ever resort to such means, I will fully document it and discuss it with you when we next meet.

#### Google Reader

- o I do not follow current or former clients on Google Reader and I do not use Google Reader to share articles.
- o If there are things you want to share with me that you feel are relevant to your treatment whether they are news items or things you have created, I encourage you to bring these items of interest into our sessions.

#### **Business Review Sites**

- o You may find my psychology practice on sites such as Yelp, Healthgrades, Yahoo Local, Bing, or other places which list businesses. Some of these sites include forums in which users rate their providers and add reviews. Many of these sites comb search engines for business listings and automatically add listings regardless of whether the business has added itself to the site.
- o If you should find my listing on any of these sites, please know that my listing is **NOT** a request for a testimonial, rating, or endorsement from you as my client.
- o The American Psychological Association's Ethics Code states under Principle 5.05 that it is unethical for psychologists to solicit testimonials: "Psychologists do not solicit testimonials from current therapy clients/patients or other persons who because of their particular circumstances are vulnerable to undue influence."

- Of course, you have a right to express yourself on any site you wish. But due to confidentiality, I cannot respond to any review on any of these sites whether it is positive or negative.
- o I urge you to take your own privacy as seriously as I take my commitment of confidentiality to you. You should also be aware that if you are using these sites to communicate indirectly with me about your feelings about our work, there is a good possibility that I may never see it.
- o If we are working together, I hope that you will bring your feelings and reactions to our work directly into the therapy process. This can be an important part of therapy, even if you decide we are not a good fit. None of this is meant to keep you from sharing that you are in therapy with me wherever and with whomever you like.
- Confidentiality means that I cannot tell people that you are my client and my Ethics
   Code prohibits me from requesting testimonials. But you are more than welcome to tell
   anyone you wish that I'm your therapist or how you feel about the treatment I provided
   to you, in any forum of your choosing.
- o If you do choose to write something on a business review site, I hope you will keep in mind that you may be sharing personally revealing information in a public forum. I urge you to create a pseudonym that is not linked to your regular email address or friend networks for your own privacy and protection.
- o If you feel I have done something harmful or unethical and you do not feel comfortable discussing it with me, you can always contact the Board of Psychology, which oversees licensing, and they will review the services I have provided.

Board of Examiners of Psychologists 201 NE 38th Terrace (Suite 3) Oklahoma City, OK 73105 (405) 524-9094

#### Location Based Services

- o If you used location-based services on your mobile phone, you may wish to be aware of the privacy issues related to using these services.
- o I do not place my practice as a check-in location on various sites such as Foursquare, Gowalla, Loopt, etc.
- However, if you have GPS tracking enabled on your device, it is possible that others may surmise that you are a therapy client due to regular check-ins at my office on a weekly basis.
- o Please be aware of this risk if you are intentionally "checking in," from my office or if you have a passive LBS app enabled on your phone.

#### E-Mail

- o I prefer that you call the front desk to arrange or modify appointments as email services may not be checked in a timely fashion.
- Please do not email me content related to your therapy sessions, as email is not completely secure or confidential.

- o If you choose to communicate with me by email, be aware that all emails are retained in the logs of your and my Internet service providers. While it is unlikely that someone will be looking at these logs, they are, in theory, available to be read by the system administrator(s) of the Internet service provider.
- o You should also know that any emails I receive from you and any responses that I send to you become a part of your legal record.

## VI. Questions and Complaints

If you have questions about this notice, disagreed with a decision I make about access to your records, or have concerns about your privacy rights, you may contact Dr. Deann Gattis, at (405) 321-3600.

If you believe that your privacy rights have been violated and wish to file a complaint, you may send your written complaint to Dr. Deann Gattis, 2300 McKown Drive, Norman, OK 73072-6678.

You may send a written complaint to the Oklahoma Board of Examiners of Psychologists. The person listed above can provide you with the appropriate address upon request.

You have specific rights under the Privacy Rule. I will not retaliate against you for exercising your right to file a complaint.

# VII. Effective Date, Restrictions and Changes to Privacy Policy

This notice updated on August 1, 2012.

I reserve the right to change the terms of this notice and to make new notice provisions effective for all Protected Health Information that I maintain. I will provide you with a revised notice, in writing, which will be available in my office.

#### VIII. Enforcement

Deann M. Gattis, Ph.D. is responsible for enforcing this policy. Individuals who violate this policy will be subject to the appropriate and applicable disciplinary process, up to and including termination or dismissal.