

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.

Norcon Family Counseling, LLC ("Norcon") is committed to protecting the privacy and security of your protected health information (PHI). This Notice describes your rights, our responsibilities, and common ways we may use and disclose PHI under the Health Insurance Portability and Accountability Act (HIPAA) and other applicable law.

This Notice applies to Norcon Family Counseling, LLC and, as applicable, the licensed, provisionally licensed, supervised, employed, and independently contracted mental-health professionals who provide services through Norcon. This may include professional counselors, clinical social workers, marriage and family therapists, and clinicians practicing under supervision toward independent licensure.

Your Rights

Get an electronic or paper copy of your health record

You may ask to inspect or obtain an electronic or paper copy of health information we maintain about you that is part of your designated record set. In most cases, we will provide access within the time required by HIPAA. We may charge only fees permitted by law. Psychotherapy notes and certain other records receive special treatment under federal law and may not be included in the ordinary right of access.

Ask us to correct your health record

You may ask us in writing to correct health information you believe is incorrect or incomplete. We may deny the request in circumstances permitted by law, but we will explain the denial in writing and describe available next steps.

Request confidential communications

You may ask us to contact you in a specific way (for example, only at a particular phone number) or to send mail to a different address. We will accommodate reasonable requests as required by law.

Ask us to limit what we use or share

You may ask us not to use or disclose certain health information for treatment, payment, or health-care operations. We are generally not required to agree, except that when you pay for a service or item out of pocket in full, you may ask us not to disclose information about that item or service to your health plan for payment or operations, and we will honor the request when the law requires us to do so.

Receive a list of certain disclosures

You may request an accounting of certain disclosures of your health information for the period allowed by law. The accounting does not include every disclosure, such as many disclosures for treatment, payment, or health-care operations. One accounting in a 12-month period is generally provided without charge; a reasonable fee may apply to additional requests as permitted by law.

Get a copy of this Notice

You may request a paper copy of this Notice at any time, even if you agreed to receive it electronically.

Choose someone to act for you

If you have given someone medical power of attorney, if someone is your legal guardian or other authorized personal representative, or if another law gives a person authority to act for you, that person may exercise your privacy rights to the extent permitted by law. We may ask for documentation of that authority.

File a complaint without retaliation

If you believe your privacy rights have been violated, you may contact Norcon's Privacy Officer or file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights. Norcon will not retaliate against you for filing a complaint.

Your Choices

For certain health information, you can tell us your choices about what we share. If you have a clear preference about how we share information in the situations below, tell us and we will follow your instructions when required by law.

- Share information with family, close friends, or others involved in your care or payment for your care;
- Share information in a disaster-relief situation;
- Contact you about fundraising, if Norcon ever conducts fundraising. You may tell us not to contact you again. If a fundraising communication would use substance use disorder patient records protected by 42 CFR Part 2, we will first give you clear and conspicuous notice and an opportunity to choose not to receive those fundraising communications.

If you are unable to tell us your preference, for example because you are unconscious, we may share information when we believe it is in your best interest and the law permits it. We may also share information when needed to lessen a serious and imminent threat to health or safety.

Uses that generally require written authorization

We will obtain your written authorization for uses and disclosures that HIPAA requires to be authorized, including most uses and disclosures of psychotherapy notes, marketing communications that require authorization, and sale of PHI. You may revoke an authorization in writing except to the extent we have already acted in reliance on it.

Information disclosed pursuant to a valid authorization or as otherwise permitted by law may be redisclosed by the recipient and may no longer be protected by HIPAA, unless another law continues to protect the information. Records protected by 42 CFR Part 2 remain subject to the additional protections described below.

Substance Use Disorder (Part 2) Records

To the extent Norcon creates or maintains substance use disorder patient records protected by 42 CFR Part 2, those records receive additional federal confidentiality protections. Part 2 records may be used or disclosed only as permitted by Part 2. When a single consent authorizes use or disclosure for treatment, payment, and health-care operations as allowed by Part 2, recipients may be permitted to redisclose the information in accordance with HIPAA, except as otherwise prohibited. Part 2 records, or testimony describing their contents, generally may not be used or disclosed in civil, criminal, administrative, or legislative investigations or proceedings against you unless you provide written consent or a qualifying court order is issued after the required notice and opportunity to be heard. A court order authorizing the use or disclosure must also be accompanied by a subpoena or other legal requirement compelling disclosure before the requested record is used or disclosed.

How We May Use and Share Your Health Information

Treat you

We may use and disclose your health information to provide, coordinate, or manage your care and related services. For example, a therapist may consult with another treating professional or, when applicable, an approved supervisor.

Run our organization

We may use and disclose your health information for health-care operations such as quality improvement, staff training and supervision, credentialing, auditing, compliance, business management, and other activities necessary to operate the practice. Example: We may use information from your record to review the quality of services, supervise or train clinical staff, or conduct compliance activities.

Bill for services

We may use and disclose health information to obtain payment, determine eligibility or benefits, obtain authorization, submit claims, and communicate about account balances, subject to applicable law and payer rules. Example: We may provide your diagnosis and information about services you received to your health insurance plan so it can process and pay a claim.

Other uses and disclosures permitted or required by law

We may use or disclose health information without your authorization when federal or Missouri law permits or requires it. Examples may include:

- Public-health and safety activities, including reporting certain diseases or adverse events and preventing or reducing a serious threat to health or safety;
- Reporting suspected child abuse or neglect and reporting abuse, neglect, or exploitation of an eligible/vulnerable adult when required by law;
- Health oversight activities, audits, investigations, inspections, licensure, and compliance activities;
- Workers' compensation and similar programs when authorized by law;
- Law-enforcement purposes and correctional institutions in circumstances permitted by law;

- Judicial or administrative proceedings in response to a court order, subpoena, discovery request, or other lawful process when legal requirements are met;
- Coroners, medical examiners, funeral directors, organ/tissue donation, and other legally authorized functions;
- National-security, protective-service, and military activities when authorized by law;
- Research when legal requirements and privacy safeguards are satisfied.

Some categories of health information, including certain mental-health, substance-use-disorder, and other specially protected records, may be subject to stricter federal or Missouri confidentiality requirements. When another law is more protective than HIPAA, Norcon will follow the more protective requirement.

Missouri and Other More Protective Confidentiality Laws

Missouri law and professional licensing rules may provide confidentiality protections for counseling and social-work records that are more restrictive than HIPAA. When those rules or other applicable laws impose greater limits on disclosure, Norcon will follow the more protective requirement. In general, Norcon will not disclose confidential mental-health treatment information to another person or organization without appropriate authorization unless the disclosure is otherwise permitted or required by law, such as for treatment when legally permitted, mandatory reporting, protection from a serious threat to health or safety, a valid court order or other lawful process, health oversight, or another legally authorized purpose.

Our Responsibilities

- We are required by law to maintain the privacy and security of your PHI and to provide you with this Notice of our legal duties and privacy practices.
- We will notify affected individuals as required by law following a breach of unsecured PHI. We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the privacy practices described in the Notice that is currently in effect.
- We will not use or disclose your information other than as described here unless you authorize the use or disclosure in writing or another law permits or requires it.
- We apply reasonable administrative, technical, and physical safeguards to protect PHI.

Changes to this Notice

We may change the terms of this Notice, and the changes may apply to health information we already maintain as well as information we receive in the future. The current Notice will be available at Norcon, on our website, and upon request. The effective date appears at the top of the Notice.

Contact / Privacy Officer

Privacy Officer	Melinda Haney
Organization	Norcon Family Counseling, LLC
Address	20 Westwoods Drive, Liberty, MO 64068
Phone	816-781-2349
Email	norcon@norconfc.com
Website	www.norconfc.com

You may also file a privacy complaint with the U.S. Department of Health and Human Services, Office for Civil Rights. Norcon will not retaliate against you for exercising privacy rights or filing a complaint.

Effective Date: August 17, 2026