

Notice of Privacy Practices

Effective Date: February 16, 2026

This notice describes how medical information about you may be used and disclosed and how you can access this information. Please review it carefully.

Barber Family Counseling, PLLC (BFC) is committed to protecting your health information. The Health Insurance Portability and Accountability Act (HIPAA) requires us to maintain the privacy of your Protected Health Information (PHI), provide you with this Notice of Privacy Practices, and notify you of your rights and our legal duties regarding your PHI.

We are required by law to maintain the privacy and security of your protected health information and will notify you if a breach occurs that may compromise the privacy or security of your information.

What is Protected Health Information (PHI)?

PHI refers to any information that identifies you and relates to your past, present, or future physical or mental health, the care you receive, or payment for that care.

Some health information, including certain records related to substance use disorder treatment, may receive additional federal confidentiality protections under 42 CFR Part 2. When applicable, these records are handled with heightened privacy safeguards as required by federal law.

How We May Use and Disclose Your PHI

We may use or share your PHI without your authorization for the following purposes:

- **Treatment:** To provide, coordinate, or manage your care with other healthcare providers.
- **Payment:** To obtain payment from you, your insurance, or a third party.
- **Healthcare Operations:** To support administrative and operational functions such as quality improvement, staff training, internal audits, compliance activities, and practice continuity, as permitted by law and limited to the minimum necessary.
- **Public Health and Safety:** To report communicable diseases, prevent or control injury or disability, or respond to public health concerns.
- **When Required by Law:** To comply with federal, state, or local laws or legal proceedings.
- **To Prevent a Serious Threat:** To protect your safety or the safety of others if a clear and imminent threat is identified.
- **Health Oversight:** To respond to audits, licensing reviews, or investigations by authorized regulatory agencies.

Special Protections for Substance Use Disorder Records

Some health information related to substance use disorder treatment may receive additional confidentiality protections under federal law (42 CFR Part 2).

What this means for you:

- Certain substance use treatment records may be shared only with your written permission, even in situations where other health information could be shared under HIPAA.
- In many cases, these records cannot be redisclosed by others without your explicit consent.
- You may have additional rights regarding how this information is used and shared.

These protections do not apply to all clients. If your care involves substance use disorder treatment information that is subject to these rules, your provider will explain what applies and obtain any additional permissions required by law. Our goal is always to protect your privacy while ensuring you receive safe, coordinated care.

Limits of Confidentiality

While your provider will not share your information without your permission in most cases, there are legal exceptions where disclosure may be required:

- **Risk of Harm to Self:** If you disclose serious intent and ability to harm yourself, your provider may contact emergency services, a guardian, or others who can assist in ensuring your safety.
- **Risk of Harm to Others:** If you express an imminent and specific threat to harm someone else, your provider may be required to notify the potential victim, law enforcement, or others.
- **Grave Disability:** If you are unable to provide for your basic needs or those of a dependent, your provider may need to involve appropriate authorities.
- **Abuse or Neglect:** If you report or are suspected of abuse or neglect of a child, elder, or dependent adult, your provider is legally required to report it to the Department of Human Services and possibly law enforcement.
- **Court Proceedings:** If a judge orders the release of your records, your provider must comply with the order, though efforts will be made to protect your privacy and inform you when possible.

Other Permitted Disclosures Without Consent

Other situations where consent is not legally required include:

- When a government agency requests information for oversight
- If you file a complaint or lawsuit against your provider or the practice
- If you are incapacitated and your provider needs to identify you in an emergency
- When sharing information for billing, referrals, or coordination of care with other healthcare providers

Some disclosures may still be restricted if they involve protected substance use disorder records.

Your Rights Regarding PHI

Barber Family Counseling & Wellness

(866) 644-6131
BFCWellness.org

You have the right to:

- Request limits on how your PHI is used or disclosed
- Request that we communicate with you in a specific way (for example by phone or at a different address)
- Access and obtain a copy of your health records, with limited exceptions
- Request corrections to your health information
- Receive a list (accounting) of certain disclosures we have made
- Request a paper copy of this notice at any time
- File a complaint without fear of retaliation

If you authorize a use or disclosure, you may revoke it in writing at any time.

Additional rights may apply to substance use disorder records when protected by federal law.

Other Entities and Business Associates

In some cases, entities that support our operations may access limited information to help maintain services. These may include our electronic health record provider, records custodian, legal representatives, and others. These parties are known as Business Associates under HIPAA. BFC has signed agreements with these entities requiring them to maintain the same level of confidentiality required by law.

Some business associates may also be required to follow additional federal rules if they handle protected substance use disorder records.

You may request a copy of a blank Business Associate Agreement for review. Please note: Business Associates do not have access to your clinical records for treatment purposes.

How to File a Complaint

If you believe your privacy rights have been violated, you may file a complaint with our office or with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting <https://www.hhs.gov/hipaa/filing-a-complaint/index.html>.

To file a complaint or get more information, contact:
Dr. Courtney Barber, PsyD, LMFT
courtney@bfcwellness.org

Barber Family Counseling & Wellness

(866) 644-6131
BFCWellness.org