



## Owens Mental Health

### **Notice of Privacy Practices & Privacy Policy**

**Effective Date:** [September 23, 2025]

This Notice describes how health information about you may be used and disclosed, and how you can access this information. Please review it carefully.

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### **Our Commitment to Your Privacy**

Owens Mental Health is committed to protecting your health information in compliance with:

- The federal **HIPAA Privacy Rule**
  - The **Washington State Uniform Health Care Information Act (RCW 70.02)**
  - State laws specific to **mental health and behavioral health records**
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### **How We May Use and Disclose Your Information**

We may use and disclose your health information for:

- **Treatment** – Coordinating your care with other healthcare professionals.
- **Payment** – Billing your insurance or other payers.
- **Healthcare operations** – Managing our practice, quality reviews, training, and audits.

We may also share information when required by law, including:

- Public health and safety reporting
- Court orders or subpoenas
- To prevent or respond to a serious safety threat

### **Special Protections in Washington State**

- **Mental health and psychotherapy records:** These records have stricter disclosure rules and generally require your **written authorization** before release.
- **Minor patients:** Washington law allows certain minors to consent to mental health treatment. Access to these records by parents/guardians may be limited if disclosure could harm the minor.



- **Breach notifications:** If your information is involved in a data breach, Owens Mental Health will notify you **within 30 days**, as required by Washington law.
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### Telehealth & Telemedicine Services

Owens Mental Health provides mental health services through secure telehealth platforms. We are committed to maintaining your privacy and confidentiality during virtual visits.

- **Secure Platforms:** Telehealth sessions are conducted using HIPAA-compliant technology with encryption to protect your information.
  - **Limitations:** While we use safeguards, telehealth may carry some risk of technical interruptions or unauthorized access. We encourage you to use a private, secure internet connection and location when possible.
  - **Recording:** Telehealth sessions will **not** be recorded without your explicit written authorization.
  - **Information Sharing:** Your health information from telehealth visits is treated the same as information from in-person visits and is protected under HIPAA and Washington law.
  - **Consent:** By engaging in telehealth services, you acknowledge understanding of the benefits, limitations, and privacy protections involved.
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### Your Rights

You have the right to:

- Request a copy of your health record.
  - Ask for corrections if you believe your record is incomplete or incorrect.
  - Request confidential communications (for example, to be contacted at an alternate phone number).
  - Ask us to limit disclosures of your information (though we may not always be able to agree).
  - Receive an accounting of disclosures.
  - Obtain a paper copy of this Notice at any time.
  - File a complaint without fear of retaliation.
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## **Our Duties**

We are required by law to:

- Maintain the privacy and security of your health information.
- Notify you within **30 days** of any breach involving your personal information.
- Provide you with this Notice and follow its terms.

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## **Questions or Complaints**

If you have questions about this Notice or believe your rights have been violated, you may contact us at:

### **Owens Mental Health**

1455 NW Leary Way, Suite 400, Seattle WA, 98107

Office Phone: 425-954-5119

Email: [info@owensmentalhealth.com](mailto:info@owensmentalhealth.com)

You may also file a complaint with the:

### **U.S. Department of Health & Human Services – Office for Civil Rights**

Phone: 1-800-368-1019

Website: <https://www.hhs.gov/ocr/privacy/hipaa/complaints/>

Or with the **Washington State Department of Health**.

You will not be penalized for filing a complaint.