

Root & Fray PLLC – HIPAA Notice of Privacy Practices

Last Updated: 03.29.2026

This document contains two distinct sections:

1. HIPAA Notice of Privacy Practices
2. Privacy Notice (Client Rights & Practice Responsibilities)

HIPAA Notice of Privacy Practices

This section explains how your Protected Health Information (PHI) may be used, shared, and protected in accordance with the Health Insurance Portability and Accountability Act (HIPAA).

Uses and Disclosures Permitted Without Authorization

We may use or disclose your PHI without your written authorization in the following situations, whether services are provided in person or via secure telehealth:

- Treatment: To coordinate and manage your care with other healthcare professionals involved in your treatment.
- Payment: To bill for services rendered and collect payment.
- Healthcare Operations: For quality assessment, administrative processes, auditing, and improving clinical services.
- Legal Requirements: When required by federal or state law (e.g., subpoenas, court orders, mandatory reporting, audits).
- Public Health & Safety: To prevent or reduce serious threats to your health or safety, report suspected abuse or neglect, or respond to emergencies.
- National Security / Government Functions: If required by military command authorities or other authorized government agencies.

Client Rights Under HIPAA

You have the right to:

- Request access to your records (electronic or paper).
- Request corrections if information is incomplete or incorrect.
- Request limits on how your PHI is used or shared.
- Request confidential communications, including preferred contact methods.
- Receive an accounting of certain disclosures made outside of treatment, payment, or operations.

- Revoke prior authorizations in writing at any time, except when actions have already been taken based on the prior authorization.
- File a complaint if you believe your rights have been violated.

Our Responsibilities

We are legally required to:

- Protect the privacy and security of your PHI.
- Provide you with this Notice of Privacy Practices.
- Follow the terms of this notice.
- Notify you promptly if a breach occurs that may compromise your unsecured PHI.

Privacy Notice (Client Rights & Practice Responsibilities)

This section outlines your general privacy rights and explains how Root & Fray PLLC handle your personal and mental health information.

Your Rights

You have the right to:

- Get a copy of your records: Available electronically or on paper within 30 days of your request. Reasonable fees may apply as permitted by law.
- Request corrections: If your record is incomplete or inaccurate, you may request a correction. We will respond within 60 days.
- Request confidential communication: You may request that we contact you at a different address or through a specific method (e.g., portal, email, phone, text). Preferences can be updated in the client portal at any time.
- Limit information sharing: While not all requests can be granted, restrictions must be honored when you pay out-of-pocket in full for a service, including any applicable session or processing fees.
- Know how your information is shared: You may request a list ("accounting") of disclosures that occurred outside of treatment, payment, or healthcare operations.
- Receive a paper copy: 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 someone has legal authority (e.g., legal guardian, medical power of attorney), we will verify that documentation before allowing them to act on your behalf.

- File a complaint without retaliation: You may file a complaint with Root & Fray PLLC, or the U.S. Department of Health and Human Services if you believe your privacy rights were violated.

How We Share Your Information

We may use or share your information to:

- Treat you and coordinate care.
- Run our practice, improve services, and conduct internal operations.
- Bill for services you receive.
- Report suspected abuse, neglect, or threats of harm.
- Participate in authorized health research.
- Comply with federal or state laws.
- Respond to legal actions or law enforcement requests.
- Fulfill government or national security functions.

We will not share your information without your written authorization for:

- Marketing.
- The sale of your information.
- Most uses or disclosures of psychotherapy notes.

You may opt out of any fundraising communications.

State-Specific Compliance

Root & Fray PLLC complies with all applicable state privacy laws, including:

- Texas Medical Privacy Act (HB 300): Enhanced safeguards for electronic data protection, access controls, and staff training requirements.
- California CMIA & CPRA: Additional state privacy rights, including your right to access, request correction, and request deletion of certain personal data.
- Florida Telehealth Law (Chapter 456.47, F.S.): Ensures proper informed consent and secure handling of electronic health information in telehealth settings.
- North Carolina Telehealth Requirements (NCGS § 90-270.140 & Board Rules): Requires documentation of informed consent specific to telehealth services, as well as verification of the client's identity and physical location at the time of each session.