Infiniti Counseling Notice of Privacy Practices

INFINITI COUNSELING, LLC

NOTICE OF PRIVACY PRACTICES

1745 Shea Center Dr #495
Highlands Ranch, CO 80129
303-906-3457

Effective Date: September 7, 2026

THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED, YOUR RIGHTS REGARDING YOUR HEALTH INFORMATION, AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Infiniti Counseling, LLC is committed to protecting the privacy and security of your health information. We create and maintain records of the care and services you receive from us. These records are used to provide treatment, coordinate care, obtain payment, operate our practice, and comply with applicable legal and professional requirements.

This Notice applies to protected health information ("PHI") maintained by Infiniti Counseling, LLC. Some substance use disorder ("SUD") records may also receive additional confidentiality protections under **42 CFR Part 2**. When Part 2 applies, we will follow those additional requirements.

Mental Health Records and Colorado Law
Mental health records may receive additional confidentiality protections under Colorado law. Infiniti Counseling, LLC will not disclose mental health treatment information without your authorization except when disclosure is permitted or required by applicable law.

YOUR RIGHTS

Get an Electronic or Paper Copy of Your Record

You may ask to see or receive an electronic or paper copy of your health record and other health information we maintain about you.

Psychotherapy notes and, when applicable, SUD counseling notes are subject to additional protections and may not be included within the records available for routine access.

We generally will provide a copy or summary of your health information within the time required by law. We may charge a reasonable, cost-based fee when permitted by law.

Ask Us to Correct Your Record

You may ask us to correct health information you believe is incorrect or incomplete.

We may deny your request in circumstances permitted by law. If we deny your request, we will explain the reason in writing within the time required by law.

Request Confidential Communications
You may ask us to contact you in a particular way, such as by telephone, email, patient portal, or mail, or at a particular location.

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 to every requested restriction. If we agree, we will follow the restriction except when disclosure is otherwise permitted or required by law, including when information may be necessary for emergency treatment.

If you pay for a health care service **in full out of pocket**, you may ask us not to disclose information about that service to your health plan for payment or health care operations. We will honor that request unless disclosure is required by law.

Receive an Accounting of Disclosures

You may request an accounting of certain disclosures of your health information made during the six years before your request.

The accounting generally does not include disclosures for treatment, payment, or health care operations or disclosures you specifically authorized, except when applicable law provides otherwise.

Additional accounting rights may apply to electronic SUD records protected by 42 CFR Part 2 as those requirements become applicable.

Get a Copy of This Notice

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

Choose Someone to Act for You

If another person has legal authority to act as your personal representative, such as a legal guardian or someone with appropriate medical power of attorney, that person may exercise applicable privacy rights on your behalf.

We will verify the person's authority before allowing them to act for you.

File a Complaint

If you believe your privacy or confidentiality rights have been violated, you may file a complaint with Infiniti Counseling, LLC.

You may also file a complaint with the **U.S. Department of Health and Human Services Office for Civil Rights**.

HHS Office for Civil Rights complaint information

Infiniti Counseling, LLC will not retaliate against you for filing a complaint.

YOUR CHOICES

For certain health information, you may tell us your preferences regarding how information is shared.

For example, you may tell us whether we may share relevant information with family members, close friends, or others involved in your care or payment for your care.

If you cannot communicate your preference, such as during an emergency, we may disclose information when permitted by law and when we determine that doing so is in your best interest or is necessary to prevent or lessen a serious and imminent threat to health or safety.

Written Authorization Is Generally Required For

We generally will obtain your written authorization before:
using PHI for marketing purposes;
selling PHI; or
using or disclosing most psychotherapy notes.

Infiniti Counseling, LLC does not sell your PHI.

Psychotherapy notes receive additional protection under HIPAA. When applicable, **SUD counseling notes** also receive additional protection under 42 CFR Part 2 and generally require separate specific consent for their use or disclosure.

HOW WE TYPICALLY USE OR DISCLOSE YOUR INFORMATION

Treatment

We may use your health information to provide treatment and may share information with other health professionals involved in your care as permitted by law.

For example, we may coordinate with another health care provider concerning your treatment, medications, diagnosis, or continuity of care.

Health Care Operations

We may use and disclose health information to operate our practice, improve services, conduct quality activities, supervise appropriate personnel, meet professional and credentialing obligations, and perform other lawful health care operations.

Payment

We may use and disclose health information to bill and obtain payment from health plans and other responsible payers.

For example, we may provide information required by your insurance company to process a claim.

Additional consent requirements apply when information is protected by 42 CFR Part 2.

OTHER USES AND DISCLOSURES

Subject to applicable federal and Colorado law, health information may sometimes be used or disclosed without your authorization for purposes including:

- public health and safety activities;
- reporting suspected abuse or neglect when required by law;
- preventing or reducing a serious threat to health or safety;
- health oversight activities;
- research when applicable legal requirements are satisfied;
- workers' compensation;
- certain law-enforcement purposes;
- activities involving coroners or medical examiners;
- specialized government functions;
- compliance with federal or state law; and
- responding to certain judicial or administrative proceedings.

We will disclose only information permitted or required by applicable law.

SUBSTANCE USE DISORDER RECORDS AND 42 CFR PART 2

Some records relating to substance use disorder diagnosis, treatment, or referral for treatment may receive additional federal confidentiality protections under **42 CFR Part 2**.

When Part 2 applies, Infiniti Counseling, LLC will comply with those additional protections.

Consent for Uses and Disclosures

Part 2 generally requires patient consent for many uses and disclosures of SUD records.

When permitted by law, you may provide consent allowing future uses and disclosures of Part 2 records for treatment, payment, and health care operations. You may also provide more limited consent for specific disclosures.

Redisclosure

When you provide appropriate consent for treatment, payment, and health care operations, Part 2 information may be disclosed to certain HIPAA-covered entities or business associates. Those recipients may subsequently use and disclose that information as permitted by HIPAA and applicable law.

The special Part 2 restrictions concerning use of the information in legal proceedings against you continue to apply.

Legal Proceedings

Records protected by 42 CFR Part 2 generally **may not be used or disclosed in civil, criminal, administrative, or legislative investigations or proceedings against you** unless:

1. you provide the specific written consent required by law; or
2. disclosure is authorized by a Part 2-compliant court order and the required subpoena or other legal mandate.

A general authorization to disclose health information does not necessarily authorize the use of Part 2 records against you in a legal proceeding.

SUD Counseling Notes

When applicable, SUD counseling notes receive additional protection under federal law. Disclosure of SUD counseling notes generally requires a **separate, specific consent** and is not authorized merely through a general consent for treatment, payment, or health care operations.

Emergencies and Other Permitted Disclosures

Part 2 permits certain limited disclosures without patient consent when statutory and regulatory requirements are satisfied, including certain:

- bona fide medical emergencies;
- audits and evaluations;
- research activities;
- reports of suspected child abuse and neglect;

- reports concerning crimes or threats of crimes on program premises or against program personnel; and
- cause-of-death inquiries.

We will follow applicable Part 2 requirements when making any such disclosure.

PSYCHOTHERAPY NOTES

Infiniti Counseling, LLC may maintain psychotherapy notes as that term is defined under HIPAA.

Psychotherapy notes receive additional protection and generally require your specific written authorization before they are disclosed, except in circumstances in which HIPAA permits their use or disclosure without authorization.

Psychotherapy notes are maintained separately from the medical record when applicable.

OUR RESPONSIBILITIES

Infiniti Counseling, LLC is required to:

- maintain the privacy and security of your protected health information;
- comply with applicable HIPAA and, when applicable, 42 CFR Part 2 confidentiality requirements;
- provide you with this Notice describing our legal duties and privacy practices;
- follow the duties and privacy practices described in the Notice currently in effect; and
- notify you promptly if a breach occurs that may have compromised the privacy or security of your information.

We will not use or disclose your information other than as described in this Notice unless you authorize us to do so in writing or another use or disclosure is permitted or required by law.

When you provide authorization, you generally may revoke that authorization in writing, except to the extent we have already acted in reliance upon it or another exception applies.

CHANGES TO THIS NOTICE

Infiniti Counseling, LLC may change the terms of this Notice. Changes may apply to health information we already maintain as well as information we receive in the future.

When the Notice is revised, the current version will be available upon request and through the practice's applicable electronic or office resources.

QUESTIONS OR PRIVACY COMPLAINTS

Questions regarding this Notice, requests to exercise your privacy rights, or complaints regarding our privacy practices may be directed to:

Privacy Officer
Melanie E. Morris

1745 Shea Center Dr #495
Highlands Ranch, CO 80129
303-906-3457

Email: infiniticounseling@gmail.com

You may also contact the U.S. Department of Health and Human Services Office for Civil Rights.

File an HHS privacy complaint

You will not be retaliated against for exercising your privacy rights or filing a complaint.

ACKNOWLEDGMENT OF RECEIPT

BY CLICKING ON THE CHECKBOX BELOW, I ACKNOWLEDGE THAT I HAVE RECEIVED OR BEEN PROVIDED ACCESS TO THE INFINITI COUNSELING, LLC NOTICE OF PRIVACY PRACTICES.

Client Name (Printed): _____

Client Signature: _____

Date: _____