



Prism Mental Health Solutions Inc.

Patient Privacy & Confidentiality Policy



Transforming Mental Health Through Compassion, Clarity, and Clinical Excellence

1. Our Commitment to Your Privacy



Prism Mental Health Solutions Inc. (Prism MHS) respects your privacy and understands that confidentiality is essential to mental health treatment. We protect your personal and health information in accordance with applicable federal and Pennsylvania laws and professional standards.

2. What Information We Protect



Protected health information may include your identity, contact information, appointment history, diagnoses, assessments, treatment plans, progress notes, communications, billing information, and other information connected to your care. Information may be protected whether spoken, written, or stored electronically.

3. How Your Information May Be Used



Your information may be used or shared for treatment, payment, healthcare operations, or other purposes permitted or required by applicable law. Some disclosures require your written authorization. Certain mental health, psychotherapy-note, substance-use, and other sensitive records may receive additional protections under federal or Pennsylvania law.

4. Sharing Information With Others



We do not assume that family members, employers, schools, attorneys, or other individuals may access your information merely because they ask. When authorization is required, we will request a valid authorization and limit the release to its lawful scope. Different rules may apply to parents, guardians, minors, and legally authorized representatives.

5. Court Requests, Subpoenas, and Safety Exceptions



A subpoena or request from an attorney does not automatically permit release of your mental health records. We review legal requests under applicable confidentiality, privilege, and court-order requirements. Certain disclosures may be permitted or required by law, including mandatory reporting and legally recognized safety situations. We cannot promise absolute confidentiality where an applicable legal exception requires or authorizes disclosure.

6. Your Privacy Rights



Subject to applicable law, you may request access to or copies of eligible records, ask for corrections, request confidential communications or restrictions on certain uses or disclosures, and request an accounting of certain disclosures. Some requests have legal limits or exceptions. You may also receive our formal Notice of Privacy Practices.

7. Requesting Your Records



You may request access to your records through Prism MHS. We may need to verify your identity or the authority of a representative before releasing information. Requests will be processed within applicable legal deadlines. Some records or portions of records may be subject to special access rules, and any permitted copying fees will follow applicable law.

8. How Long We Keep Records



Prism MHS maintains clinical records for at least five years from the last entry, and longer when required by law, payer or contractual requirements, a legal hold, or other applicable obligations. Records involving minors may require longer retention. When records are eligible for destruction, we use appropriate safeguards to protect confidentiality.

9. Privacy During Telehealth and Communication



We use approved systems and reasonable safeguards to protect information during telehealth and electronic communication. For routine written clinician communication, use TherapyNotes secure messaging; for calls or voicemail, use the Prism MHS office telephone system. Please select a private location for telehealth sessions whenever possible.

10. Questions, Concerns, and Complaints



If you have a privacy question, would like to exercise a privacy right, or believe your information has been handled improperly, please contact Prism MHS and ask for the Privacy Officer. You may raise a good-faith privacy concern without retaliation. You may also submit a complaint to the U.S. Department of Health and Human Services Office for Civil Rights.

11. Relationship to Our Notice of Privacy Practices



This patient-friendly policy summarizes key confidentiality expectations. It does not replace the formal Prism MHS Notice of Privacy Practices, which provides legally required details about uses, disclosures, rights, and complaint procedures. Where applicable law or the Notice provides more specific rights or requirements, those requirements control.

12. Patient Acknowledgment (Optional)



I acknowledge that I have received or been offered access to the Prism MHS Patient Privacy & Confidentiality Policy. My acknowledgment does not waive any privacy rights.

Patient Name: _____

Signature: _____ Date: _____