

Rose Clinic Consent to Privacy Practices

Notice of Privacy Practices

Oct 5, 2026

ROSE CLINIC LLC

390 Commerce Drive Fort Washington, PA 19034

(610) 271-0138

Effective date: October 5, 2026

THIS NOTICE DESCRIBES HOW MEDICAL AND MENTAL HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

If you have questions about this notice, please contact Rose Clinic's Privacy Officer, Dinara Triantafyllou, MD, at the phone number above.

Rose Clinic's commitment to your privacy

Rose Clinic takes its responsibility to protect your health information and what you share in your sessions seriously. The clinic keeps a record of the care it provides so that it can treat you well and meet its legal obligations. This notice explains how Rose Clinic may use and share that record, what rights you have over it, and what the law requires of the clinic.

The law requires Rose Clinic to:

- Keep your protected health information (PHI) private.
- Give you this notice of its legal duties and privacy practices.
- Follow the terms of the notice currently in effect.
- Notify you promptly if a breach occurs that may have compromised the privacy or security of your information.
- Not use or share your information in ways other than those described here unless you give written permission. You may revoke that permission in writing at any time, except to the extent the clinic has already acted on it.

Two sets of law govern your records. The first is Federal law, chiefly the Health Insurance Portability and Accountability Act (HIPAA). The second is Pennsylvania law, which in several areas protects mental health records more strictly than HIPAA does. Where Pennsylvania law is stricter, Rose Clinic follows it. The section titled "Additional protections under Pennsylvania law" describes the most important of them.

Treatment, payment, and health care operations

Federal law allows Rose Clinic to use and share your information without your written authorization for three routine purposes. Pennsylvania law narrows these permissions for mental health records, particularly what may be shared with insurers, and the clinic follows the narrower rule.

Treatment. Rose Clinic uses your information to diagnose and treat you. The clinic may share it with other clinicians involved in your care, for example when your clinician consults with a colleague, coordinates with your primary care physician, or refers you to another provider. When sharing for treatment, the clinic may share the full information a clinician needs rather than only the minimum, because good care depends on a complete picture.

Payment. Rose Clinic may use and share your information to bill and collect payment from you or your insurance plan. Without your written consent, the clinic shares with an insurer only what it needs to verify that services were provided, such as your diagnosis, dates of service, and the type of treatment. If an insurer asks for more, such as for a utilization review, the clinic will ask for your consent first.

Health care operations. Rose Clinic may use your information to run the practice, such as reviewing the quality of its care, meeting licensing and accreditation requirements, and working with billing services, electronic record vendors, or attorneys. Anyone who handles your information on the clinic's behalf must sign a business associate agreement that obligates them to protect it as Rose Clinic does.

Appointment reminders and related services. Rose Clinic may contact you to remind you of appointments and may tell you about treatment options or health services it offers that may interest you. We will ask if you would like it to use a particular phone number, address, or method.

Additional protections under Pennsylvania law

Mental health records. Pennsylvania's Mental Health Procedures Act and its regulations (55 Pa. Code §§ 5100.31 to 5100.39) treat mental health records as confidential and allow disclosure without consent only in limited circumstances. These include sharing with others actively involved in your treatment, limited sharing with payers, responding to a court order, and preventing serious harm.

Psychiatrist-patient privilege. Under 42 Pa.C.S. § 5944, what you tell a Rose Clinic psychiatrist or licensed psychologist in confidence is privileged. Your clinician cannot be compelled to reveal it in a civil or criminal proceeding without your written consent, except in narrow situations the law defines.

Minors. In Pennsylvania, a minor 14 or older may consent to outpatient mental health treatment, and a parent or guardian may also consent on the minor's behalf. Who may see and release the minor's records depends on who consented to treatment. A parent who consented may receive the information needed to make informed decisions about the minor's care. A minor who consented generally controls the release of their own records. Rose Clinic is happy to walk you through how this applies to your family.

HIV-related information. Under Pennsylvania's Confidentiality of HIV-Related Information Act, Rose Clinic will not disclose HIV-related information without your specific written consent, except as that law allows.

Drug and alcohol information. Pennsylvania law (71 P.S. § 1690.108 and 4 Pa. Code § 255.5) strictly limits disclosure of drug and alcohol treatment information, in some respects more than federal law does. If you receive substance use treatment at Rose Clinic, the section on substance use disorder records below also applies.

Uses and disclosures that require your written authorization

Psychotherapy notes. Your clinician may keep psychotherapy notes, as defined in 45 C.F.R. § 164.501. These are the clinician's personal notes analyzing the content of your sessions, and they are kept separate from the rest of your record. Rose Clinic will not use or share them without your written authorization except:

- For use by the clinician who wrote them in treating you.
- For training or supervising mental health practitioners.
- To defend the clinic or your clinician in a legal proceeding you bring.
- When the Secretary of Health and Human Services investigates the clinic's compliance with HIPAA.
- When required by law, limited to what the law requires.
- For health oversight of the clinician who wrote the notes, when required by law.
- When a coroner or medical examiner requires it in carrying out legal duties.
- When needed to prevent a serious threat to the health or safety of others.

Marketing. Rose Clinic will not use or share your information for marketing.

Sale of information. Rose Clinic will not sell your information.

Anything else. Any use or disclosure not described in this notice requires your written authorization, which you may revoke in writing at any time.

Uses and disclosures that do not require your authorization

In the situations below, the law permits or requires Rose Clinic to share information without your authorization. In each case the clinic shares only what is necessary and follows whichever law, state or federal, is more protective of your privacy.

Child abuse. Rose Clinic's physicians and clinicians are mandated reporters under Pennsylvania's Child Protective Services Law (23 Pa.C.S. § 6311). If a clinician has reasonable cause to suspect a child is being abused, the clinician must report it to ChildLine or law enforcement.

Abuse of older adults and adults with disabilities. Rose Clinic may report suspected abuse, neglect, or exploitation of an older adult or an adult with a disability to the appropriate protective services agency, as Pennsylvania law permits or requires.

Serious threats to health or safety. If you communicate a specific and immediate threat of serious bodily harm against a specifically identified or readily identifiable person, Pennsylvania law may require your clinician to take reasonable steps to protect that person, which can include warning them. The clinic may also share information

when necessary to prevent a serious and imminent threat to your own safety, including in arranging emergency evaluation or hospitalization.

Court orders and legal proceedings. Rose Clinic will release your records, and its clinicians will testify about your care in a legal proceeding, only with your written consent or under a court order. Under Pennsylvania law, a subpoena alone, without a court order, is generally not enough to release mental health records. If the clinic receives one, it will notify you and assert your privilege on your behalf.

Health oversight. Rose Clinic may share information with agencies that oversee health care, such as the Pennsylvania State Board of Medicine, for audits, investigations, and licensing.

Law enforcement. Rose Clinic may share limited information with law enforcement when required by law or to report a crime on its premises.

Coroners and medical examiners. Rose Clinic may share information with a coroner or medical examiner carrying out duties authorized by law.

Research. Rose Clinic will use your information for research only with your written authorization, or when an institutional review board has approved the research and waived authorization under federal rules.

Specialized government functions. In limited cases, federal law may require disclosure for military, national security, or correctional purposes.

Workers' compensation. Rose Clinic may share information as needed to comply with workers' compensation laws, though it prefers to obtain your authorization first.

Required by law. Rose Clinic may share information when another state or federal law requires it, limited to what that law requires.

Family members and others involved in your care

With your permission, Rose Clinic may share information with a family member, friend, or other person you identify as involved in your care or in paying for it. You may object or limit what is shared at any time. In an emergency, or if you are unable to agree or object, your clinician will use professional judgment to decide whether sharing is in your best interest, and you will have the chance to object as soon as you are able.

Rose Clinic does not use your information for fundraising.

Substance use disorder records

This section applies only if you receive substance use disorder treatment at Rose Clinic that is covered by federal regulations at 42 C.F.R. Part 2. Those records receive extra protection.

- **Consent.** Rose Clinic will share these records for treatment, payment, and health care operations only with your written consent. You may give a single consent for all future such uses, and you may revoke it in writing at any time, except to the extent the clinic has already acted on it.
- **Redisclosure.** Once records are shared with your consent for treatment, payment, or operations, the recipient may in some cases redisclose them as HIPAA permits, and they may no longer be protected by Part 2.
- **Legal proceedings.** These records, and testimony about their contents, may not be used against you in any civil, criminal, administrative, or legislative proceeding without your specific written consent or a court order that meets Part 2's requirements. A subpoena alone is not sufficient.
- **Counseling notes.** If your clinician keeps separate notes documenting the content of substance use counseling sessions, Rose Clinic will share them only with a separate written authorization that is not combined with consent for any other records.
- **Fundraising.** Rose Clinic will not use these records for fundraising. If that ever changes, you will have a clear opportunity to opt out first.
- **Your rights.** You may request a list of disclosures of these records made with your consent, and you may file a complaint about a Part 2 violation with the Secretary of Health and Human Services, as described below.

Your rights regarding your information

To exercise any of these rights, please make your request to Rose Clinic in writing.

To see and get a copy of your record. You may inspect or get a paper or electronic copy of your record, except psychotherapy notes and substance use counseling notes. Rose Clinic will respond within 30 days and may charge a reasonable, cost-based fee. In rare cases the clinic may deny part of a request if access is reasonably likely to

endanger your life or physical safety or that of someone else. If so, the clinic will explain why in writing, and you may ask to have the decision reviewed by another licensed professional.

To request a correction. If you believe information in your record is wrong or incomplete, you may ask Rose Clinic to correct it. The clinic may decline, but if it does, it will tell you why in writing within 60 days, and you may submit a statement of disagreement for your record.

To request limits on what is shared. You may ask Rose Clinic not to use or share certain information for treatment, payment, or operations. The clinic is not required to agree, but it will consider every request carefully. If you pay for a service in full out of pocket and ask that information about it not be shared with your health plan, the clinic will agree unless the law requires the disclosure.

To choose how the clinic contacts you. You may ask Rose Clinic to reach you in a particular way, such as only on your cell phone or at a different mailing address. The clinic will agree to all reasonable requests and will not ask you why.

To get a list of disclosures. You may ask for a list of times Rose Clinic shared your information in the past six years for purposes other than treatment, payment, or operations, or disclosures you authorized. The clinic will respond within 60 days. The first list in any 12-month period is free, and the clinic may charge a reasonable, cost-based fee for additional requests.

To choose someone to act for you. If you have given someone medical power of attorney, or someone is your legal guardian, that person may exercise your rights and make choices about your information. Rose Clinic will confirm their authority before acting.

To be notified of a breach. Rose Clinic will notify you if your unsecured information is accessed or disclosed in a way the law considers a breach.

To get a copy of this notice. You may have a paper copy of this notice at any time, even if you have already received it electronically.

Complaints and changes to this notice

If you believe your privacy rights have been violated, Rose Clinic encourages you to raise it with the Privacy Officer directly so the clinic can try to address it. You may also file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, 200 Independence Avenue SW, Washington, DC 20201, by calling 1-877-696-6775, or online at www.hhs.gov/ocr/complaints. Rose Clinic will not retaliate against you in any way for filing a complaint.

Rose Clinic may change the terms of this notice, and the changes will apply to all information it holds about you. The current notice will always be available at the clinic, on its website, and on request.

Acknowledgment of receipt

By signing below, I acknowledge that I have received a copy of the Notice of Privacy Practices for Rose Clinic. Signing this form does not mean I agree with every practice described. It confirms only that I received the notice.