



Water and Grace Healing Space
PO Box #7, Hyde Park, VT 05655
P: (802) 610-2181
F: (844) 689-2490

Notice of Privacy Practices

Water and Grace Healing Space PLLC, respects your privacy and understands that your personal health information is very sensitive. We respect our legal obligation to keep health information that identifies you as private. We are obligated by law to give you notice of our privacy practices. This notice describes how we protect your health information and what rights you have regarding it.

Federal and state law allows us to use and disclose your protected health information for purposes of treatment and health care operations. State law requires us to obtain your authorization to disclose this information for payment purposes, which is part of your intake paperwork.

Our Responsibilities

We are required by law to maintain the privacy and security of your protected health information (PHI). We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information. We must follow the duties and privacy practices described in this notice and give you a copy of it. We will not use or share your information other than as described here unless you tell us we can in writing.

Your Rights

You have the right to:

1. Get a copy of your medical record.
2. Correct your medical record.
3. Request confidential communications.
4. Ask us to limit what we use or share.
5. Get a list of those with whom we've shared information.
6. Get a copy of this privacy notice.
7. Choose someone to act for you.
8. File a complaint if you believe your rights are violated.

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Our Uses and Disclosures

We may use and share your health information in the following ways:

1. Treat you – We can use your health information and share it with other professionals who are treating you.
2. Run our organization – We can use and share your health information to run our practice, improve your care, and contact you when necessary.
3. Bill for your services – We can use and share your health information to bill and get payment from health plans or other entities.
4. Address public health and safety issues – We can share your health information for public health activities such as preventing disease, reporting suspected abuse, or reporting adverse medication reactions.
5. Research – We can use or share your information for health research.
6. Comply with the law – We will share information about you if state or federal laws require it.
7. Respond to organ and tissue donation requests – We can share health information about you with organ procurement organizations.
8. Work with a medical examiner or funeral director – We can share information with these professionals when an individual dies.
9. Respond to workers' compensation, law enforcement, and other government requests – We can share information for workers' compensation claims, for law enforcement purposes, or for specialized government functions.
10. Respond to lawsuits and legal actions – We can share your health information in response to a court or administrative order, or in response to a subpoena.

Contact Information

If you have any questions about this notice or if you believe your privacy rights have been violated, you may file a complaint with our office. You may also file a complaint with the Secretary of the U.S. Department of Health and Human Services.