



Beauty for Ashes Counseling Services, LLC
Notice of Privacy Practices (NPP)
Effective Date: May 20, 2025

This Notice describes how medical and mental health information about you may be used and disclosed and how you can access this information. Please review it carefully.

Your Rights

You have the right to:

- Get a copy of your paper or electronic medical record
 - Correct your paper or electronic medical record
 - Request confidential communication
 - Ask us to limit the information we share
 - Get a list of those with whom we've shared your information
 - Get a copy of this privacy notice at any time
 - Choose someone to act for you
 - File a complaint if you believe your privacy rights have been violated
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Your Choices

You have some choices in the way we use and share information as we:

- Tell family and friends about your condition (with your permission)
 - Provide disaster relief
 - Include you in a patient directory (if applicable)
 - Market our services and sell your information (only with written permission)
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Our Uses and Disclosures

We typically use or share your health information in the following ways:

- **Treatment** – To provide, coordinate, or manage your care.
- **Payment** – To bill and receive payment from health plans or other entities.



- **Healthcare Operations** – For practice management, quality assurance, and administrative tasks.

We may also share your information:

- For public health and safety issues (as required by law)
- To comply with legal obligations (court orders, subpoenas)
- With health oversight agencies for activities authorized by law
- With a coroner or medical examiner (in the case of a client's death)
- For workers' compensation claims
- For research (with safeguards or written permission)

Confidentiality of Mental Health and Substance Use Information

Information regarding mental health or substance use treatment has additional protections under state and federal laws. We will not disclose this information without your written consent, except as permitted or required by law (e.g., in cases of abuse, danger to self or others, court order, or emergency).

Your Right to Access Records

You have the right to request access to your designated record set. Requests will be reviewed and responded to within 30 days, in accordance with HIPAA guidelines.

Right to Revoke Authorization

You may revoke your authorization to disclose information at any time in writing. This revocation will apply to future disclosures and does not affect information previously shared with your consent.

Data Breach Notification

In the event of a data breach that affects your protected health information, you will be notified in writing without unreasonable delay and no later than 60 days from discovery.



Minors and Privacy

When working with minors, parents or legal guardians typically have the right to access treatment information. However, confidentiality may be maintained at the therapist's discretion in accordance with state laws when it supports the minor's safety or treatment.

Our Responsibilities

We are required by law to:

- Maintain the privacy and security of your protected health information (PHI)
 - Inform you of breaches that may have compromised the privacy or security of your information
 - Follow the duties and privacy practices described in this notice
 - Not use or share your information other than as described here unless you provide written authorization
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Telehealth and Electronic Communication

We use secure, HIPAA-compliant platforms such as SimplePractice for scheduling, documentation, messaging, and telehealth. You may consent to receive communication via email or text for appointment reminders or other practice-related updates.

Use of SimplePractice

We partner with SimplePractice, a HIPAA-compliant electronic health record (EHR) platform, for scheduling, secure messaging, billing, and telehealth. While your information is stored securely, your use of email or text communication implies your consent to this method of communication.



Practice Philosophy

At Beauty for Ashes Counseling Services, we believe in creating a safe, nonjudgmental space where your healing journey is honored. Your privacy is part of that commitment.

Questions or Complaints

If you have questions or believe your privacy rights have been violated, contact:

Karissa Coleman, ED.S, LPC, BC-TMH, NCC

Beauty for Ashes Counseling Services, LLC

Email: karissa@beautyforashescounselingllc.com

Phone:

You can also file a complaint with the U.S. Department of Health and Human Services at:

[w-ww.hhs.gov/ocr/privacy/hipaa/complaints/](http://www.hhs.gov/ocr/privacy/hipaa/complaints/)

You will not be penalized for filing a complaint.

Acknowledgment of Receipt

You will be asked to acknowledge receipt of this notice through your client portal in SimplePractice. This confirms you've been informed of how your information may be used and your rights under HIPAA.