

Kids Unfiltered Inc.

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## **NOTICE OF PRIVACY PRACTICES**

**Effective Date: February 16, 2026**

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

This Notice applies to services provided through our electronic health record and practice management system, including our patient portal, as well as information posted or collected through our website.

### **Our Legal Duties**

We are required by law to:

- Maintain the privacy and security of your protected health information (PHI);
- Provide you with this Notice of Privacy Practices;
- Follow the terms of this Notice currently in effect; and
- Notify you following a breach of unsecured PHI.

This Notice applies to all records created or received by our practice relating to your care, whether created by clinicians, administrative staff, or business associates acting on our behalf. This includes information maintained in our electronic health record system (including patient portals), billing systems, and website-based forms.

### **What Is Protected Health Information (PHI)**

Protected Health Information (PHI) includes information that identifies you and relates to your past, present, or future physical or mental health condition, the provision of health care to you, or payment for that care.

Certain PHI related to substance use disorder (SUD) diagnosis, treatment, or referral for treatment may also be protected under **42 CFR Part 2 ("Part 2")**, which provides additional confidentiality protections beyond HIPAA.

## **How We May Use and Disclose Your Information**

### **For Treatment**

We may use and disclose your PHI to provide, coordinate, or manage your health care and related services. This includes sharing information with other health care providers involved in your care.

### **For Payment**

We may use and disclose your PHI to obtain payment for services provided to you, including billing insurance companies, verifying coverage, and collecting payment.

### **For Health Care Operations**

We may use and disclose your PHI for operations necessary to run our practice, improve quality of care, conduct audits, and ensure compliance with legal requirements.

### **Uses and Disclosures Required by Law**

We may disclose your PHI when required to do so by federal, state, or local law, including for public health activities, reporting abuse or neglect, or responding to lawful court orders.

### **Special Protections for Substance Use Disorder Records (42 CFR Part 2)**

Records that identify you as having, or having had, a substance use disorder and that are created or maintained in connection with SUD treatment are protected under Part 2.

### **General Rule**

We **may not** use or disclose Part 2–protected records without your written consent, **except as permitted or required by law**.

### **Single Consent for Treatment, Payment, and Health Care Operations**

Under updated Part 2 regulations aligned with HIPAA, you may provide a **single written consent** allowing the use and disclosure of Part 2 records for:

- Treatment
- Payment
- Health care operations

Once disclosed under a valid consent, recipients may further use or disclose the information in accordance with HIPAA, **except** for use in civil, criminal, administrative, or legislative proceedings against you related to substance use, which is strictly prohibited without a court order.

## **Prohibition on Re-Disclosure Notice**

All Part 2 disclosures include the following statement:

This information has been disclosed to you from records protected by federal confidentiality rules (42 CFR Part 2). The federal rules prohibit you from making any further disclosure unless expressly permitted by the written consent of the individual to whom it pertains or as otherwise permitted by 42 CFR Part 2.

## **Uses and Disclosures That Require Your Written Authorization**

We will obtain your written authorization before using or disclosing your PHI or Part 2 records for purposes such as:

- Marketing (with limited exceptions);
- Sale of PHI;
- Most uses of psychotherapy notes;
- Disclosures not otherwise described in this Notice.

You may revoke an authorization at any time in writing, except to the extent we have already relied on it.

## **California Supplement (Applies to California Patients)**

In addition to the rights described below, California law provides patients with privacy protections that may be more stringent than federal requirements. Where California law offers greater protection or broader rights regarding your health information, we will comply with California law.

This California Supplement is intended to work **in conjunction with HIPAA and 42 CFR Part 2**. Nothing in this section reduces or limits the confidentiality protections afforded to substance use disorder records under federal law.

## **Your Rights Regarding Your Information**

### **Right to Access**

You have the right to inspect and obtain a copy of your PHI and Part 2 records, subject to limited exceptions.

### **Right to Amend**

You may request an amendment to your PHI if you believe it is incorrect or incomplete.

### **Right to an Accounting of Disclosures**

You have the right to request a list of certain disclosures of your PHI.

## **Right to Request Restrictions**

You may request restrictions on certain uses and disclosures of your PHI. We are not required to agree to all requests.

## **Right to Request Confidential Communications**

You may request that we communicate with you in a specific way or at a specific location.

## **Right to File a Complaint**

You may file a complaint if you believe your privacy rights have been violated. You will not be retaliated against for filing a complaint.

Complaints may be filed with:

- Our Privacy Officer;
- The U.S. Department of Health and Human Services, Office for Civil Rights; or
- California authorities, including the California Department of Public Health or the California Attorney General's Office.

California law may allow you to pursue remedies for violations of medical privacy rights in addition to federal options.

## **Breach Notification**

We will notify you in accordance with applicable law if a breach of your unsecured PHI or Part 2-protected information occurs.

## **Changes to This Notice**

We reserve the right to change this Notice and make the new Notice effective for all PHI we maintain. Updated Notices will be available upon request and posted in our office and on our website, if applicable.

## **Electronic Systems and Patient Portal**

We use electronic systems to support scheduling, documentation, billing, secure messaging, and record storage. These systems may allow you to view, download, or transmit your health information securely. Access to these systems is governed by unique user credentials and security safeguards consistent with HIPAA and Part 2 requirements.

Communications sent through our patient portal are considered part of your designated record set. While portal messaging is encrypted and secure, you should avoid using unsecured email to communicate sensitive information unless you understand and accept the associated risks.

## **Website Use and Online Forms**

If you submit information through our website (for example, via contact forms, intake forms, or secure portals), that information may become part of your medical record and will be protected in accordance with this Notice. We do not sell or rent your health information collected through our website.

**Contact Information**

If you have questions about this Notice or your privacy rights, please contact:

**Privacy Officer:** Stephanie Cunningham

**Phone:** 424-241-2669

**Email:** [stephanie@kidsunfiltered.com](mailto:stephanie@kidsunfiltered.com)

**Acknowledgment of Receipt** I acknowledge that I have received or had electronic access to the Notice of Privacy Practices effective February 16, 2026.