The Imago Dei Firm

Notice of Privacy Practices

Effective Date: September 8, 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.

The Imago Dei Firm is a Texas telehealth mental health practice. This Notice applies to every clinician who provides services through the practice, including the founder, contracted clinicians, and clinicians practicing under supervision. When we say "we" or "the practice" in this Notice, we mean all of them.

1. Our Duties

We are required by law to keep your health information private, to give you this Notice of our legal duties and privacy practices, and to follow the Notice that is currently in effect. We are also required to notify you if a breach of your unsecured health information occurs.

We may change this Notice at any time. Changes apply to all health information we already have as well as information we receive in the future. If we make a material change, we will post the new Notice on our website and provide it through our client portal. You may request a copy at any time.

2. Your Health Information

"Health information" means any information that identifies you and relates to your mental health, the care you receive, or payment for that care. It includes your intake forms, session notes, treatment plans, diagnoses, billing records, and communications between you and your clinician.

Texas law gives mental health records additional protection beyond federal law. We follow the stricter rule whenever the two differ.

3. How We May Use and Disclose Your Health Information Without Your Written Authorization

The law allows us to use and share your health information for the following purposes without asking your permission each time.

Treatment

Your clinician uses your information to provide care. Within the practice, information may be shared among your clinician, the founder, and administrative staff to coordinate your care. If your clinician practices under a supervision plan approved by the Texas Behavioral Health Executive Council, your information will be discussed with that clinical supervisor. Supervisors are bound by the same confidentiality obligations. With your permission, we may also coordinate with other providers involved in your care, such as a psychiatrist or primary care physician.

Payment

We use your information to bill you and collect payment. Our practice is private pay and does not bill insurance directly. If you ask us to, we will prepare a superbill containing your name, date of service, service code, diagnosis code, and clinician information so that you can submit it to your insurer for possible reimbursement. Once you submit it, the insurer is governed by its own privacy rules.

Health Care Operations

We use your information to run the practice. This includes quality review, clinical supervision, training, compliance auditing, and business planning. Whenever possible we use information that does not identify you.

Business Associates

We use outside companies to help us operate. Examples include our electronic health record and scheduling system, our payment and superbill processing service, secure video platforms, and clinical documentation software. Each of these companies has signed an agreement requiring it to protect your information to the same standard we do.

AI-Assisted Clinical Documentation

Your clinician may use secure software that records and transcribes sessions to help prepare clinical notes. Recordings and transcripts are stored by a vendor that has signed a business associate agreement with us, are used only to create your record, and are not used for any

other purpose. You may decline this. Tell your clinician before your session begins and documentation will be completed without recording.

Appointment Reminders and Practice Communications

We may contact you by phone, text, email, or through the client portal to remind you of appointments, confirm scheduling, or provide information about your care. You may ask us to use a particular method or number.

4. Other Uses and Disclosures Permitted or Required by Law

In the following situations we may be permitted or required to share your information without your authorization. In each case we share only what the law allows.

- **Abuse or neglect.** Texas law requires us to report suspected abuse, neglect, or exploitation of a child, an elderly person, or a person with a disability.
- **Threats of harm.** If your clinician believes there is a probability of imminent physical injury to you or another person, Texas law permits disclosure to medical or law enforcement personnel to prevent the harm.
- **Court orders and legal proceedings.** We will release information in response to a court order signed by a judge. A subpoena alone is generally not enough for mental health records in Texas; we will notify you and give you an opportunity to object where the law allows.
- **Licensing and regulatory oversight.** The Texas Behavioral Health Executive Council and other oversight agencies may review records as part of investigations, audits, or licensure compliance.
- **Public health and safety.** As required by law, for public health activities such as disease reporting.
- **Coroners, medical examiners, and funeral directors.** As necessary to carry out their duties.
- **Workers' compensation.** As authorized by workers' compensation law.
- **Military, national security, and correctional settings.** As required by law for members of the armed forces, for national security purposes, or for individuals in custody.

5. Uses and Disclosures That Require Your Written Authorization

We will not use or share your information for the purposes below unless you sign a written authorization. You may revoke an authorization at any time in writing, except to the extent we have already acted on it.

- Psychotherapy notes. Any personal process notes your clinician keeps separate from your official record receive extra protection and are shared only with your authorization or as required by law.
- Marketing. We will not use your information for marketing.
- Sale of information. We will never sell your health information.
- Electronic disclosure. Texas law requires your written authorization before we send your health information electronically to any person or organization not otherwise permitted above.
- Any other purpose not described in this Notice.

6. Clients Who Are Minors

If you are under 18, your parent or legal guardian generally has the right to access your records and must consent to your treatment, with limited exceptions under Texas law. Your clinician will discuss with you and your parent or guardian at the start of treatment what information will and will not be shared, so that everyone understands the boundaries before therapy begins.

7. Couples and Family Sessions

When more than one person participates in treatment, the record belongs to the treatment unit. We will not release records from joint sessions without written authorization from every adult participant. Information one partner shares individually is handled according to the confidentiality agreement your clinician reviews with you at the start of couples work.

8. Your Rights

You have the following rights regarding your health information.

- **Right to access.** You may inspect and receive a copy of your record. Submit your request in writing. We will respond within 15 business days as Texas law requires. We may charge a reasonable cost-based fee for copies. In limited cases your clinician may

determine that releasing part of the record would be harmful to you; if so, we will explain why and how to request review of that decision.

- **Right to request restrictions.** You may ask us to limit how we use or share your information. We are not required to agree, but if we do, we will honor the restriction except in an emergency. If you pay for a service in full out of pocket and ask us not to share information about that service with your health plan, we must agree.
- **Right to confidential communications.** You may ask us to contact you in a specific way or at a specific location. We will accommodate reasonable requests.
- **Right to amend.** If you believe information in your record is wrong or incomplete, you may ask us to correct it. Submit your request in writing and explain the reason. We may deny the request in certain circumstances, and we will tell you why in writing.
- **Right to an accounting of disclosures.** You may ask for a list of certain disclosures we have made of your information in the six years before your request, other than those for treatment, payment, operations, or those you authorized.
- **Right to a paper copy of this Notice.** You may ask for a paper copy at any time, even if you agreed to receive it electronically.
- **Right to be notified of a breach.** We will tell you if your unsecured health information is compromised.

9. Complaints

If you believe your privacy rights have been violated, you may file a complaint with us or with the federal government. We will not retaliate against you for filing a complaint.

To file with the practice, contact our Privacy Officer at the address below.

To file with the U.S. Department of Health and Human Services, Office for Civil Rights: 200 Independence Avenue SW, Washington, DC 20201, by phone at (800) 368-1019, or online at www.hhs.gov/ocr/privacy/hipaa/complaints.

Complaints about a licensed clinician may also be directed to the Texas Behavioral Health Executive Council, 1801 Congress Ave., Suite 7.300, Austin, Texas 78701, (512) 305-7700, or toll free (800) 821-3205, www.bhec.texas.gov.

10. Contact

Privacy Officer: Quentin R. Jiles, LCSW

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