

ABIDE COUNSELING COLLECTIVE

Abide Marriage And Family Counseling Collective, Inc.

NOTICE OF PRIVACY PRACTICES

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.

Effective Date: August 10, 2026

Our Commitment to Your Privacy

Abide Marriage And Family Counseling Collective, Inc., doing business as Abide Counseling Collective ("Abide," "we," "us," or "our"), is required by law to maintain the privacy of your Protected Health Information ("PHI"), to provide you with this Notice describing our legal duties and privacy practices regarding your PHI, and to abide by the terms of the Notice currently in effect. This Notice applies to all clinical records generated by our licensed clinicians, including Adam Jelloian, LMFT (License #130755), and Spencer Posey, LMFT, CSAT (License #141641), and any associate or contracted clinicians providing services under Abide.

How We May Use and Disclose Your Health Information

Without Your Written Authorization

The following categories describe ways we may use and disclose PHI without your written authorization:

- **Treatment** — to provide, coordinate, or manage your mental health care, including consultation with your treating clinician's colleagues or supervisor for case consultation purposes.
- **Payment** — to bill and collect payment for services, including verifying insurance benefits if applicable, and providing Good Faith Estimates as required by the No Surprises Act.
- **Health Care Operations** — for activities such as quality assessment, licensing board compliance, training and supervision of associate clinicians, and business management.
- **As Required by Law** — when disclosure is required by federal, state, or local law.
- **Public Health and Safety** — to prevent or lessen a serious and imminent threat to the health or safety of you or another identifiable person, consistent with California's duty-to-warn (Tarasoff) standard, and for public health activities as required by law.
- **Abuse or Neglect** — as required by California's mandated reporting laws for suspected child abuse or neglect, elder or dependent adult abuse, or neglect.
- **Health Oversight, Judicial and Administrative Proceedings** — in response to a valid court order, subpoena, or as otherwise required by law or licensing board investigation.
- **Law Enforcement, Coroners, and Similar Purposes** — in limited circumstances required or permitted by law.
- **Workers' Compensation** — as authorized by and to the extent necessary to comply with workers' compensation laws.
- **Business Associates** — we may share PHI with contracted service providers (for example, a practice management or electronic health record platform, once selected) who perform services on our behalf and are bound by a Business Associate Agreement to protect your information.

Psychotherapy Notes

If a clinician at Abide keeps separate psychotherapy notes — private notes documenting or analyzing the content of a counseling session, kept apart from the rest of your clinical record, as defined at 45 C.F.R. § 164.501 — those notes receive heightened protection. We will obtain your written authorization before using or disclosing psychotherapy notes, except when the use or disclosure is:

- For our use in treating you
- For our own training or supervision of clinicians in group, joint, family, or individual counseling
- To defend ourselves in a legal action you bring against us
- For the Secretary of Health and Human Services to investigate our compliance with HIPAA
- Required by law, and limited to the requirements of that law
- For certain health oversight activities regarding the originator of the notes
- To a coroner performing duties authorized by law
- To avert a serious and imminent threat to health or safety

Uses That Require Your Written Authorization

Other than as described above, we will not use or disclose your PHI without your written authorization, including for marketing purposes and for any disclosure that would constitute a sale of your PHI. You may revoke a signed authorization at any time in writing, except to the extent we have already relied on it.

Substance Use Disorder Records (42 C.F.R. Part 2)

If Abide ever creates, receives, or maintains substance use disorder treatment records that are subject to the federal confidentiality regulations at 42 C.F.R. Part 2, we will handle those records consistent with the applicable Part 2 requirements as they have been aligned with HIPAA, including with respect to use, disclosure, and any required consent. This statement applies regardless of whether Abide currently holds any Part 2-protected records, in accordance with federal requirements effective February 16, 2026.

Minors

Under California law, a minor who is 12 years of age or older may, in certain circumstances, consent to their own outpatient mental health treatment (California Family Code § 6924). For clients in our teen counseling program, the scope of parental access to session content and records will be discussed and documented as part of intake, consistent with California law and clinical best practice, and may be more limited than a parent's general access to a minor client's other health records.

Your Rights Regarding Your Health Information

- Right to Inspect and Copy — you may request to inspect and obtain a copy of your PHI, with limited exceptions (for example, psychotherapy notes).
- Right to Request Amendment — you may request that we amend PHI you believe is incorrect or incomplete; we may decline in certain circumstances permitted by law, and will explain our reasoning in writing.
- Right to an Accounting of Disclosures — you may request a list of certain disclosures we have made of your PHI other than for treatment, payment, operations, and certain other excepted purposes.

- Right to Request Restrictions — you may ask us to restrict certain uses or disclosures of your PHI; we are not required to agree, except where you have paid out of pocket in full for a service and ask us not to disclose that information to a health plan.
- Right to Request Confidential Communications — you may ask us to communicate with you in a particular way or at a particular location (for example, contacting you only by a personal email or phone number).
- Right to a Paper Copy — you may request a paper copy of this Notice at any time, even if you agreed to receive it electronically.
- Right to Choose Someone to Act for You — if you have given someone medical power of attorney, or if someone is your legal guardian, that person may exercise your rights and make choices about your PHI.
- Right to File a Complaint — if you believe your privacy rights have been violated, you may file a complaint with Abide using the contact information below, with the U.S. Department of Health and Human Services Office for Civil Rights, or with the California Board of Behavioral Sciences (BBS). You will not be retaliated against for filing a complaint.

Our Duties

We are required by law to maintain the privacy of your PHI, to provide you with this Notice of our legal duties and privacy practices, and to notify you following a breach of your unsecured PHI. We reserve the right to change the terms of this Notice and to make the revised Notice effective for PHI we already maintain, as well as PHI we create or receive in the future. Any revised Notice will be made available at our office and posted on our website prior to the effective date of the changes.

Contact Information / Privacy Officer

Questions, requests, or complaints regarding this Notice or your privacy rights should be directed to our designated Privacy Officer:

Adam Jelloian, LMFT — Privacy Officer

Abide Counseling Collective

3625 E Thousand Oaks Blvd, Ste 281, Westlake Village, CA 91362

Phone: 818-584-1442

Email: adam@abidecounselingcollective.com

Organizational NPI: 1205750502 Tax ID (EIN): 42-2319466

Acknowledgment of Receipt

Your clinician will ask you to sign a separate Acknowledgment of Receipt of this Notice at the start of care, consistent with HIPAA and CAMFT documentation standards. A copy of this Notice, and of your signed acknowledgment, will be retained in your clinical record.