



**Emerge
Pediatric Therapy**

CAREGIVER HANDBOOK

**A GUIDE TO BETTER UNDERSTAND EMERGE'S
PURPOSE, POLICIES, AND PROCEDURES.**

TABLE OF CONTENTS

About Emerge

About the Owner

Core Values

Services Provided

Scheduling Information

Locations & Contact Information

Patient Financial Information

Policies & Procedures

Attendance Policy

Sick Policy

Aggression & Client Behavior Policy

Privacy Practices



ABOUT EMERGE

No one can quite prepare you for all that will come your way as a caregiver.. Obstacles and difficulties with your child's development are sometimes unavoidable. Many of these obstacles you can handle on your own. But who do you turn to when you need help?

For over 20 years, EmERGE Pediatric Therapy (formerly EmERGE-A Child's Place) has served the caregivers and children of the Triangle who have needed that extra support. So whether you need occupational, physical, or speech therapy, look no further than EmERGE Pediatric Therapy.

About the Owner, Brittini Winslow



Brittini Winslow is the owner of EmERGE, an occupational therapist, and a mother to three wonderful girls. When she was just starting her occupational therapy career, she found a placement at EmERGE - A Child's Place. She was then offered a job in 2012, proposed ideas for new changes, demonstrated her leadership, and then took over as the owner of EmERGE in 2019! Despite the unexpected challenges of 2020 and the pandemic, her flexibility and tenacity led to the opening of two additional locations in Cary and Carrboro, as well as the addition of an infant program, orofacial myofunctional program, reading interventions, and an aquatic therapy program.

Owner's Vision and Mission

Our organization is deeply committed to improving the lives of children and their families through customized occupational, speech and physical therapy. We not only work 1:1 with our clients, but we also empower the caregivers and community around the child in how to best support and create the best life for that client. We attract people within our organization that share a passion for lifelong learning. This results in a strong team of the most highly trained therapists in our area.



ABOUT EMERGE

Our Website

If you would like to learn more about Emerge's business model and what sets us apart from other pediatric therapy clinics, visit our website!

[FAQ Page](#)

Core Values

As an employer, a group of employees, and a service provider we hold the following values true, in how our staff interacts with one another, with the families we serve, and with the community, we live in:

1. **Communication** - We will strive to be active listeners who are adaptive in our delivery of a message and aware of the receiver.
2. **Authenticity** - We will strive to be genuine in our desire to build relationships and stay true to ourselves.
3. **Collaboration** - We will strive to be collaborative with our colleagues, our families, and the greater community, in order to support each other and the families we serve.
4. **Open-mindedness** - We will strive to be self-directed individuals who pursue our passions while also demonstrating openness to growth in areas that will support our families, our colleagues, and our community.
5. **Dependability** - We will strive to be reliable and follow through on our commitments and responsibilities.



ABOUT EMERGE

Types of Therapy & Services Provided

- Occupational Therapy
- Physical Therapy
- Speech-Language Therapy
- Play-based Group Therapy (Emerge Clubs)
- Feeding Therapy
- Orofacial Myofunctional Therapy
- Lactation Consultation

Who We Serve:

- Infants
- Toddlers
- School-Aged Children
- Teens
- Young Adults
- Adults (services are limited)

Areas of Support Offered:

- Sensory Differences
- Emotional Regulation
- Executive Functioning
- Social Skills
- Handwriting & Fine Motor
- Gross Motor, Balance & Coordination
- Toe Walking
- Early Milestone Development (rolling, sitting, crawling, walking)
- Feeding (picky eating & oral motor coordination)
- Pre- and Post-Care for Tongue Tie Release
- Breastfeeding difficulties
- Torticollis
- Plagiocephaly
- Articulation
- Reading (LiPS & Orton-Gillingham Methods)
- Reading & Listening Comprehension
- Apraxia of Speech
- Autism
- Language
- Augmentative and Alternative Forms of Communication
- Late Talking
- Parent Coaching
- Aquatic Occupational Therapy
- Small-Group Instruction



ABOUT EMERGE

Scheduling Options

Recurring Schedule: Therapists have a certain number of recurring spots available on a weekly basis. If your schedule aligns with an opening of one of our therapists, you will be placed in that recurring time slot.

Flexible Schedule: There are a couple ways to get onto our flexible schedule.

- a. If our therapists do not have a recurring time slot open that works for your schedule, you will be placed on the flexible schedule. Our team will call you as we have openings in the schedule that align with your availability. You are also able to call and check for schedule openings.
- b. If your schedule is inconsistent and you are unable to commit to a recurring schedule spot, you can also be placed on the flexible schedule. You can choose if you would like to be notified when there are openings, or if you prefer to call in to schedule yourself on a weekly basis.

Therapist Recognition

If you would like to recognize your child's therapist and give them a small treat, you can leave a review on Google or Yelp using their name. We will then deliver them a free coffee and card with your review on it as a token of your appreciation!

Points of Contact

If you have any questions about the following topics, please reach out to the corresponding team member for the most efficient response.

Client Satisfaction/Feedback	Brooke Brees, Clinical Director	brooke@emergepeds.com
Billing Issues	Shenee Cozart, Billing Manager	shenee@emergepeds.com
Insurance Authorization	Kathryn Becker, Prior Authorizations Representative	kathryn@emergepeds.com
Scheduling & Rescheduling	Front desk staff	Durham: (919) 928-0204 Cary: (919) 338-1522 Carrboro: (919) 338-1021

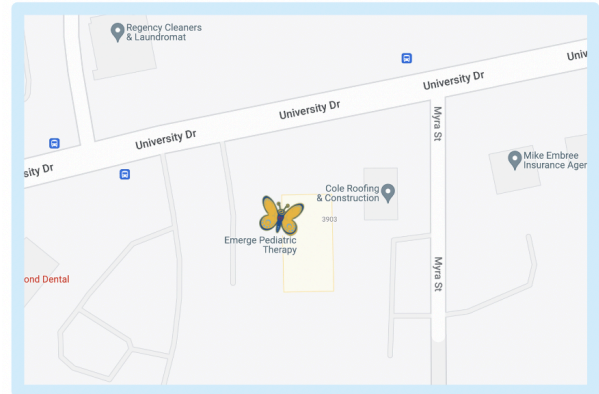


ABOUT EMERGE

Locations

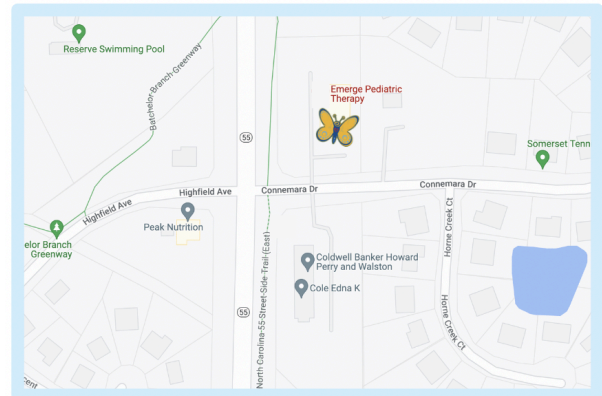
Durham

3905 University Dr, Durham, NC 27707
P: (919) 928-0204 F: (919) 229-4993
info@emergepeds.com
Clinical Manager: Kelly Goad



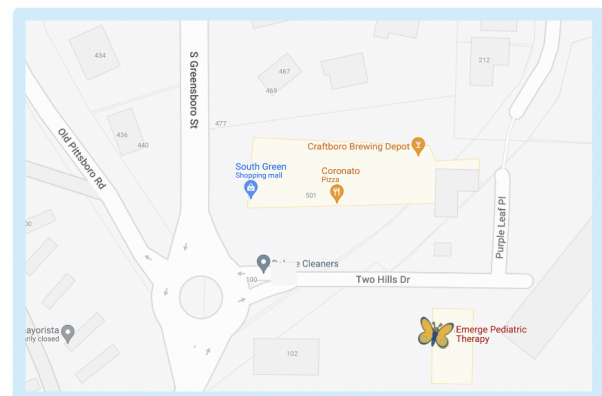
Cary

3100 NC-55 Suite 102, Cary, NC 27519
P: (919) 338-1522 F: (984) 241-0118
cary@emergepeds.com
Clinical Manager: Danielle Carey



Carrboro

110 Two Hills Dr, Carrboro, NC 27510
P: (919) 338-1490 F: (919) 338-1021
carrboro@emergepeds.com
Clinical Manager: Anne Wolfe





FINANCIAL INFORMATION

Know Your Benefits

Your health insurance policy/HSA/FSA is a contract between you and your health insurance company (or your employer, with the health insurer as administrative agent). Please be aware that it is your responsibility to know your benefits, rules and regulations. You should be knowledgeable of any deductibles, copayments, coinsurance, annual visit maximums, and prior authorization requirements. If you are not clear about your current health insurance policy benefits, you should review your plan's details online (most insurers have web portals), contact your insurer, or speak with your employer to learn about your benefits and responsibilities.

In-Network Status

Emerge is in network with Medicare, NC Medicaid, NC Medicaid Managed Care Organization Plans, and Tricare. As an in-network patient, you are responsible to notify us of any change in eligibility or other additional insurance coverage plan(s) and the failure to do so can result in the pausing of services and direct patient financial responsibility.

Out Of Network Status

Emerge Pediatric Therapy is not contracted with any Commercial Insurance Plans and therefore does not accept assignment on these claims. This means we are considered as "Out of Network" providers and cannot negotiate or guarantee the payment of claims for you. You should be knowledgeable of any deductibles, copayments, coinsurance, annual visit maximums, and prior authorization requirements as we do not perform insurance benefit eligibility for services. **Please note, our rates are audited regularly and can be adjusted per Emerge's discretion.**

Good Faith Estimate

A Good Faith Estimate will be provided by Emerge Pediatric Therapy in accordance with the No Surprises Act. This does not apply if your insurance is in-network for Emerge.



FINANCIAL INFORMATION

Dual Insurance

If you have “Out of Network” primary insurance and “In Network” secondary insurance, we are required to first file to your primary insurance and only after they process, can we file the remaining patient responsibility to the supplemental secondary insurance. Please note, your primary insurance policy **must** have Out of Network benefits for us to take you on as a dual insurance patient. Additionally, depending on the insurance company, we may request and require your support in providing us with copies of the primary’s Explanation of Benefits/Payments for each claim no later than 14 days of the claim processing. **You also agree to pay Emerge all primary claim funds that are directly reimbursed to the policyholder no later than 14 days of receiving reimbursement as it is payment for incurred services.** Any delay in this process may result in the pausing of services and direct patient financial responsibility.

New or Updated Insurance

We ask that you contact our office as soon as possible whenever you have new insurance (or) become aware of any updates or changes to your existing insurance plan. Any delay in notification, may result in the pausing of services and direct patient financial responsibility. To provide us with your updated information please send pictures of your insurance card (*front and back*) with the policyholder’s name and date of birth using one of the following secure methods: (1) Secure e-mail a copy to Shenee@EmergePeds.com or (2) Secure fax a copy to (984) 241-0008

Payment

Payment is due at the time services are rendered for all charges incurred. This does not apply if your insurance is in-network for Emerge.

A credit/debit card number will be kept on file to be charged after each visit. (Please note: if you are paying with an HSA card then we will require you to provide a second backup form of payment to be used in the event the HSA card transaction is not approved.)

Courtesy Filing

Emerge Pediatric Therapy offers complimentary filing which means we can submit a copy of the claim to your insurance for you. If you request that Emerge files for you, we will start submitting claims from the date you provide your insurance information and forward. Should you want any older dates of service filed, we can provide you with a detailed invoice statement for you to submit on your own, based on your insurer's requested methods. This does not apply if your insurance is in-network for Emerge.



FINANCIAL INFORMATION

Claim Follow Up

Please note that since we are out of network, we are not always privy to how your insurance processes your claim. So should you have additional questions or concerns, please reach out to our billing department, who will assist where we can for claims **within 90 days from the date of service**. This does not apply if your insurance is in-network for Emerge.



POLICIES & PROCEDURES

Session Length Policy

At Emerge, we value both providing caregiver education and allowing our therapists the time to wind down a session, transition out, and prepare for the next client. For these reasons our sessions are:

- 25 minutes of direct treatment followed by 5 minutes of caregiver education and therapist transition time
- 40 minutes of direct treatment followed by 5 minutes of caregiver education and therapist transition time
- *55 minutes of direct treatment followed by 5 minutes of caregiver education and therapist transition time*

For example, if your child is receiving a 30 minute session, scheduled at 8:00am, you can expect the therapist to conclude treatment activities at 8:25am. If your child is receiving a 60 minute session, scheduled at 8:00am, you can expect the therapist to conclude treatment activities at 8:55am.

Attendance Policy

Consistent attendance to therapy is extremely important in helping your child gain the most from services. The following scenarios are considered, by Emerge, to be attendance issues (regardless of illness or emergency):

- Excessive cancellations: missing more than 2 out of 8 visits
- More than 2 no-shows within an 8-week period
- Arriving more than 10 minutes late for 2 or more sessions

Emerge Pediatric Therapy requires a 24-hour notice for the cancellation of a scheduled session. If you cancel a session late (fewer than 24 hours in advance of the start of the session time) and you are out of network (insurance other than Medicaid/Tricare), you will be responsible for payment of 50% of the treatment session rate unless the session is rescheduled and attended within a week of the cancellation. Consistency is the key to progress and this policy keeps your child on track towards goals.

If you no-show to your appointment (calling at or after the start time of the session or not notifying Emerge/your therapist) and you are out of network (insurance other than Medicaid/Tricare), you will be responsible for paying for 100% of the session cost. Late/no-show fees are not eligible for insurance reimbursement.

If attendance falls below 75% (attending less than 6 out of 8 sessions), the Clinical Management team will review your child's attendance and a warning letter may be sent to remind you of our attendance policy. If attendance does not improve (i.e., there is another late cancellation, a late arrival, or a no-show), it will be recommended that the child be placed on our flex scheduling



POLICIES & PROCEDURES

list or take a break from therapy until a more consistent schedule of therapy sessions can be achieved.

School Attendance Policy

Emerge is partnered with select schools in the community and are able to provide customized services in the school setting. The following policy is intended for the children who are seen on site at their schools for occupational and/or speech therapy services.

The success we will achieve with your child depends on the consistency of treatment they receive. Our therapists are passionate about helping you and your child reach their therapy goals. This is accomplished through attending regular sessions, making up missed sessions, and following therapist's recommendations for home carryover.

School therapy sessions are provided within the school setting and during the school day. Your child's therapist will reserve a weekly time slot for your child, coordinated with their teacher to provide the least amount of disruption to the school day. In order to provide consistency, we offer a number of options for school holidays or other times when your child is absent.

If your child will not be in school on their regularly scheduled therapy day, it is your responsibility to notify the therapist in advance. The therapist will make every effort to reschedule the missed appointment to provide continuity of care.

If your child is not at school on the day of their service (i.e. due to quarantine, sickness, etc), we are able to provide a telehealth session. Telehealth sessions allow caregivers to be directly involved in the therapy session, in a way that may not be possible during the school day. Your therapist will work with you to schedule a telehealth session either during the child's regular therapy time, or during a time that is convenient for your schedule.

The following factors may also impact your child's therapy sessions within the school setting:

1. Teacher workdays/caregiver-teacher conferences: Our therapists are able to offer either in-clinic or telehealth sessions on these days so that your child does not miss therapy.
2. Inclement weather: On days when there are school closures or delays, our therapists will offer either in-clinic or telehealth sessions.
3. School breaks: Our therapists will offer either in-clinic or telehealth sessions.
4. Unexpected circumstances: in some cases, planned or unplanned drills, testing, or other school events may interfere with your child's scheduled session. We understand that you may not know when these are happening, nor be able to notify your child's therapist in advance. The therapist will make every effort to reschedule



POLICIES & PROCEDURES

5. any missed or shortened appointment, either during the school day or by offering an in-clinic or telehealth session.

We ask that you as a family make the following commitments to us and your child.

- I understand that my child is expected to be present at school during their regular appointment time.
- If I need to cancel the session, rescheduling will be offered when possible. The possible options for rescheduling may include in clinic or telehealth if there are not other availabilities for in-school therapy for that week.
- I understand if I am quarantining, have transportation issues, or a family member is sick then I can utilize the Telehealth platform to avoid having a missed session count against my child's attendance. If I'm unable to schedule a Telehealth session during my child's regular session time, I will be offered a separate "make-up" time.
- I understand that it is my responsibility to contact Emerge Pediatric Therapy if my child is unable to keep their scheduled appointment. I acknowledge that my child's therapist has a spot held uniquely for my child and will have prepared for them in advance of the session.
- I understand that consistent attendance is key to my child's success, and I will make every effort to be available for make-up sessions for missed appointments.

Sick Policy

While regular attendance at therapy sessions is crucial for your child's progress, we also understand that children get sick. We want to make the clinic a safe environment for your child and all our clients and staff. We ask that you adhere to the following guidelines in determining whether your child is well enough to attend therapy.

- Children should be free from fever, vomiting, or diarrhea without the use of Tylenol or Ibuprofen for at least 24 hours prior to their appointment.
 - A fever is considered to be a temperature at or above 100 ° F.
- Children who are home from school because of an illness should not attend therapy.
 - Please be cautious about highly contagious illnesses like covid-19*, pink eye, head lice, scabies, whooping cough, strep throat, hand foot mouth, ringworm, and chicken pox. If your child presents with one of these illnesses, do not bring him/her to therapy until the risk of transmission has passed.
- If your child is lethargic or unable to participate in daily activities due to an illness, please do not bring him/her to therapy.
- If your child develops a fever or falls ill during his/her appointment, we will end the session early. Please remain available/close by to pick your child up, if needed.
- If a sibling or other family member is actively sick and/or contagious, we ask that you also refrain from bringing them into the clinic.



POLICIES & PROCEDURES

*If your child has tested positive for covid-19, they should not come to the clinic until they are past day 5 (with day 0 being the start of symptoms and/or a positive test). They can attend sessions on day 6 if they are able to wear a well fitting mask from days 6-10.

Restroom Policy

We understand that children may need to use the restroom during their sessions. Unless your child is explicitly working on toileting within their therapy sessions or you provide verbal consent for the therapist to assist you child in toileting tasks, it is company policy that the therapist not be responsible for helping the child to don/doff clothing, wipe, or change a diaper/pull-up.

In the event that the parent/caregiver is not on site, and your child can independently use the restroom, the therapist will take the child to the restroom, close the door for privacy, and take the child back into their session once the child's trip to the restroom is complete. If your child *cannot* independently take themselves to the restroom, you are asked to make a plan with your therapist on how you would like the situation handled. The therapist will have the front desk call the phone number on file in the event of a soiled diaper or toileting accident.

Emergency Medical Care Authorization

In the event of a medical emergency, Emerge Pediatric Therapy employees will seek care for the client from the closest hospital emergency room, if deemed necessary. In the event of a medical emergency, Emerge Pediatric Therapy employees will call for an ambulance for transporting the client, if necessary. Emergency room physicians and the physician/practice on file are assumed to have consent to treat the child unless otherwise noted within the child's file in the event the parent/caregiver cannot be reached. The parent/caregiver are responsible for the bill incurred under this authorization. This authorization shall be valid for the time the client is an active client of Emerge Pediatric Therapy. This is voluntary and parent/caregiver permission may be withdrawn at any time. Such withdrawal shall be submitted in writing to Emerge Pediatric Therapy and cannot be made to the extent to which action has been taken.

Acknowledgement of Risk

Parents/caregivers acknowledge that there is some risk inherent in the use of the therapy equipment at this clinic and agree to indemnify and hold Emerge Pediatric Therapy harmless from any and all losses and claims for any injuries or other damages occurring to myself, my child(ren) or our belongings from the use of therapeutic equipment.



POLICIES & PROCEDURES

Parents/caregivers acknowledge that in the case of an emergency (including but not limited to situations such as the child running away from a session, fire, or natural disaster) their child's therapist will use their best judgment in a given situation to ensure the safety of the child, which may include physical touch to remove or protect the child from danger. Parents/caregivers agree to indemnify and hold Emerge Pediatric Therapy harmless from any and all claims for any injuries or other damages occurring to myself, my child(ren) or our belongings in a therapist's attempts to keep my child safe.

Additional Meetings

Outside meetings or consultations require at least three weeks advanced notice to allow our therapists to prepare for and to coordinate meeting dates and times. Additional meetings will be charged on a prorated basis at the hourly rate if they last more than 15 minutes.

Permission to Release

To facilitate integrated service for your child, we recommend that copies of evaluations and other written reports be shared with other professionals in your child's life (i.e. teacher, pediatrician, psychologist, tutor, etc.). Additionally, therapists are available to verbally/electronically communicate with other professionals regarding your child's care. If you are interested in a report being sent or your therapist speaking to another professional, please ask the Client Relations Coordinator or your therapist for a Permission to Release form.

Office Policies Regarding Siblings and Friends of Clients

Parents/caregivers are always welcome to accompany the child during treatment; all other individuals are asked to wait in the parking lot or waiting room when open. Parents/caregivers are responsible for monitoring their child's play while waiting for their other child to complete their therapy session(s). If a parent/caregiver leaves during their child's session, they are responsible for leaving contact information with the front desk, so that the clinic is able to contact them in the case of an emergency. If a parent/caregiver leaves during the session, they are responsible for returning 10 minutes before the close of the treatment session in order to be present for parent/caregiver education and to allow their therapist to start their next session on time.



POLICIES & PROCEDURES

Clinical Education Policy

Emerge Pediatric Therapy is committed to training students to provide state of the art therapy to children. We often have graduate and doctorate students at EmERGE Pediatric Therapy to complete their fieldwork placement. These students have completed all of their course work and been interviewed by the clinic's Fieldwork Coordinator, before coming to EmERGE Pediatric Therapy. These students are typically assigned to one therapist and participate in treatment with that therapist. The EmERGE Pediatric Therapy staff therapist always continues to be involved in the therapy session and the child benefits from having the attention of two therapists, which often optimizes the treatment time. Additionally, there will periodically be an individual observing who is interested in pursuing a career in speech, occupational, or physical therapy.

Aggression & Client Behavior Policy

At EmERGE Pediatric Therapy, we are committed to maintaining a safe and welcoming environment for both the families we serve and the staff we employ. We have a ZERO tolerance policy in regards to aggressive behaviors from families, directed towards our staff. We understand that the last few years have put incredible strain on families across the United States. Caregivers are stretched thin and seeking services can be an additional stressor.

Parents/Caregivers/Guardians/Family members of our clients are expected to use calm voices and refrain from using curse words while on the phone, during a virtual session, or when in/outside one of our physical locations. Please be courteous with the use of your cell phone and other electronic devices. When interacting with any of our staff, please put your devices away. Set the ringer to vibrate before storing away. Adults are expected to supervise their children when they are not actively in a session with their therapist.

If you have any questions about the care or are unhappy with the service received in our office, please let one of our Client Relations Coordinators or Clinical Managers know before leaving the clinic. They can make sure to get your feedback to the appropriate team member and they will be sure to follow up with you if they are unable to do so at the time of your visit. Questions about your billing can be addressed by emailing shenee@emergepeds.com.

The aggressive behaviors listed below will not be tolerated.

- Yelling or using raised voice
- Using curse words, derogatory language, or racial/cultural/sexual slurs



POLICIES & PROCEDURES

- Making threats in any form (verbal, written, text, email, letter, etc.)
- Physical touch or the insinuation of physical harm
- Using bullying techniques (intimidation, excessively talking over others, discrediting the observations or clinical reasoning of others)
- The use of or threat of firearms or other weapons
- Destruction of the physical property of Emerge Pediatric Therapy

*This list is not an inclusive list and is subject to the interpretation of the staff member.

If you engage in behavior deemed to be aggressive, Emerge Pediatric Therapy reserves the right to any of the following :

- Document aggressive behaviors in session notes or client files
- End a therapy session early
- Ask you to leave the building
- Request that another caregiver bring your child to therapy
- Discontinue providing therapy and remove your family from our schedules

If you are unable to maintain appropriate behavior and continue to threaten the peace of the clinic, we reserve the right to call the police for support.



PRIVACY PRACTICES

PROVIDER NOTICE OF PRIVACY PRACTICES

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

Uses and Disclosures: We use health information about your child for treatment, sometimes to obtain payment for treatment, for administrative purposes, and to evaluate the quality of care that your child receives. Continuity of care is part of treatment and your child's records may be shared with other providers to whom you are referred. We will ask for your written authorization before using or disclosing any identifiable health information about your child.

Your rights: In most cases, you have the right to look at or get a copy of health information about your child. If you request copies, we will charge you only normal photocopy fees. If you believe that information in your child's record is incorrect, you have the right to request that we correct the existing information.

Our legal duty: We are required by law to protect the privacy of your child's information, provide this notice about our information practices, follow the information practices that are described in this notice, and seek your acknowledgement of receipt of this notice. Before we make a significant change in our policies, we will change our notice and post the new notice on the company website and in the lobby of each clinic location. You can also request a copy of our notice at any time. For more information about our privacy practices, contact the Client Relations Coordinator at your preferred location

Complaints: If you are concerned that we have violated you or your child's privacy rights, or you disagree with a decision we made about access to your records, please contact the Client Relations Coordinator at your preferred location. You also may send a written complaint to the U.S. Department of Health and Human Services.

Provider Notice Detail

Uses and Disclosures of Protected Health Information: Following are examples of the types of uses and disclosures of your child's protected health care information that the provider is permitted to make. These examples are not meant to be exhaustive, but to describe the types of uses and disclosures.



PRIVACY PRACTICES

- **Treatment:** We will use and disclose your child's protected health information to provide, coordinate, or manage your child's health care and any related services. For example, your child's protected health information may be provided to a doctor to whom you have been referred to ensure that the doctor has the necessary information to diagnose or treat you.
- **Incidental Disclosures:** While we will take reasonable steps to safeguard the privacy of your health information, certain disclosures of your health information may occur during or as an unavoidable result of our otherwise permissible uses or disclosures of your health information. For example, other patients in the treatment or waiting area may see, or overhear discussion of, your child's health information.
- **Payment:** Your child's protected health information will be used, as needed, in activities related to obtaining payment for your child's health care services. For example, obtaining approval for a therapy payment may require that your relevant protected health information be disclosed to your health insurance company or governmental plan to obtain approval.
- **Healthcare Operations:** We may use or disclose, as needed, your child's protected health information in order to support our business activities. For example, when we review employee performance, we may need to look at what an employee has documented in your child's medical record.
- **Business Associates:** We may share your child's protected health information with a third party 'business associate' that performs various activities (e.g., billing, transcription services). Whenever an arrangement between us and a business associate involves the use of disclosure of your child's protected health information, we will have a written contract that contains terms that will protect the privacy of your child's protected health information.

Written Authorization: Other uses and disclosures of your child's protected health information will be made only with your written authorization, unless otherwise permitted or required by law as described below. You may revoke your authorization, at any time, in writing.

Opportunity to Object: We may use and disclose your child's protected health information in the following instances. You have the opportunity to object. If you are not present or able to object, then your provider may, using professional judgment, determine whether the disclosure is in your best interest.

- **Emergencies:** In an emergency treatment situation, we will provide you a Notice of Privacy Practices as soon as reasonably practicable after the delivery of treatment.
- **Communication Barriers:** We may use and disclose your child's protected health information if we have attempted to obtain acknowledgement from you of our Notice of Privacy Practices but have been unable to do so due to substantial communication barriers and we determine, using professional judgment, that you would agree.



PRIVACY PRACTICES

Without Opportunity to Object: We may use or disclose your child's protected health information in the following situations without your authorization or opportunity to object:

- **Public Health:** For public health purposes to a public health authority or to a person who is at risk of contracting or spreading your child's disease.
- **Abuse or Neglect:** To an appropriate authority to report child abuse or neglect, if we believe that your child has been a victim of abuse, neglect, or domestic violence.
- **Legal Proceedings:** In the course of legal proceedings.
- **Law Enforcement:** For law enforcement purposes, such as pertaining to victims of a crime or to prevent a crime.
- **Compliance:** To the Department of Health and Human Services to investigate our compliance.

In general, we may use or disclose your protected health information as required by law and limited to the relevant requirements of the law.

Your Rights

You have the right to:

- Inspect and copy your child's protected health information. However, we may refuse to provide access to certain information for a civil or criminal proceeding.
- Request a restriction of your child's protected health information. You may ask us not to use or disclose certain parts of your child's protected health information for treatment, payment or healthcare operations. You may also request that information not be disclosed to family members or friends who may be involved in your child's care. Your request must state the specific restriction requested and to whom you want the restriction to apply. We are not required to agree to a restriction that you may request, but if we do agree, then we must act accordingly.
- Request to receive confidential communications from us by alternative means or at an alternative location. We will accommodate reasonable requests. We may also condition this accommodation by asking you for information as to how payment will be handled or specification of an alternative address or other method of contact. We will not request an explanation from you as to the basis for the request.
- Ask us to amend your child's protected health information. You may request an amendment of protected health information about you. If we deny your request for amendment, you have the right to file a statement of disagreement with us, and your medical record will note the disputed information.
- Obtain a paper copy of this notice from us, upon request, even if you have agreed to accept this notice electronically.