



Alnahhal Behavioral Counselling Services
d/b/a Phoenix Behavioral Consulting
825 Eden Road, Lancaster, PA
Phone: (717) 894-8388
hsadek@phoenixaba.org
www.abaphoenix.org

Notice of Privacy Practices for Protected Health Information

Effective date: October 1, 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.

Phoenix Behavioral Consulting is permitted by federal privacy law to make uses and disclosures of your health information for the purposes of treatment, payment and health care operations. Protected health information (PHI) is the information that we create and obtain in providing our services to you and your family. Such information may include documenting your symptoms and behaviors, assessment results, diagnoses, treatment and applying for future care or treatment. In addition, it includes billing documents for services rendered.

Examples of uses for treatment purposes

- Phoenix Behavioral Consulting may use your health information to provide you with services.
- A Behavior Analyst/Specialist may obtain treatment information about you and record it in your client file.
- Over the course of your treatment, a Behavior Analyst/Specialist may need to consult with other professionals or service providers involved in your medical care or treatment (for example, a physician, speech therapist, occupational therapist or teacher). He or she will obtain authorization to share your professional information with these individuals.
- Your health information may be shared with other clinical staff at Phoenix Behavioral Consulting for additional support in developing your child's treatment program.

Examples of uses for payment purposes

- Phoenix Behavioral Consulting will submit requests for payment to your health insurance company. The health insurance company (or other agencies or businesses helping us obtain payment) will request information from Phoenix Behavioral Consulting regarding the care given. Phoenix Behavioral Consulting will then provide information to them about you and the services provided.

Examples of uses for health care operations

- Phoenix Behavioral Consulting obtains services from our insurers or other business associates such as quality assessment, quality improvement, outcome evaluation, protocol and clinical guideline development, training programs, credentialing, medical review, legal services and insurance. In those cases, Phoenix Behavioral Consulting will share information about you or your child to obtain those services.

Your Health Information Rights

The health and billing records that we maintain are the physical property of Phoenix Behavioral Consulting. The information in them, however, belongs to you, and you have the right to:

- Request a restriction on certain uses and disclosures of your and your child's health information by contacting our office. Although we are not required to agree to every request, we will comply with any reasonable request we grant.
- Request a restriction on disclosures of health information to a health plan for purposes of carrying out payment or health care operations (and not for purposes of carrying out treatment) when the information pertains solely to a health care service for which you have paid out of pocket in full. We must comply with this request.
- Obtain a paper copy of the current Notice of Privacy Practices for Protected Health Information by making a request at our office, even if you have agreed to receive the notice electronically.
- Inspect and get a copy, paper or electronic, of your health record and billing record.
- Appeal a denial of access to your protected health information, except in certain circumstances.
- Request that your health care record be amended to correct incomplete or incorrect information by delivering a request to our office. Requests may be denied if the information requested for amending:
 - Was not created by Phoenix Behavioral Consulting
 - Is not part of the health information kept by the office
 - Is not part of the information that you would be permitted to inspect or copy
 - Is accurate and complete

If your request is denied, you will be informed of the reason for the denial, and you will have an opportunity to submit a statement of disagreement to be maintained with your records. Other rights include the right to:

- Request that communication of your health information be made by alternative means or at an alternative location by delivering the request in writing to our office.
- Obtain an accounting of disclosures of your health information as required to be maintained by law by delivering a request to our office. An accounting will not include uses and disclosures of information for treatment, payment or operations; disclosures or uses made to you or made at your request; uses or disclosures made pursuant to an authorization signed by you; uses or disclosures made in a facility directory or to family members or friends relevant to that person's involvement in your child's care or in payment for such care; or uses or disclosures to notify family or others responsible for your care of your location, condition or death.
- Revoke authorizations that you made previously to use or disclose information by delivering a written revocation to our office, except to the extent information or action has already been taken.
- Be notified promptly if a breach occurs that may have compromised the privacy or security of your health information.

If you want to exercise any of the above rights, please contact our Administrative Director at (717) 894-8388 or make an appointment during business hours. She will inform you of the steps that need to be taken to exercise your rights.

Parents and Legal Guardians

When our client is a minor, the parent or legal guardian generally acts as the child's personal representative and may exercise the rights described in this notice on the child's behalf, except where Pennsylvania law allows the minor to control their own health information. We will verify that a person has this authority before acting on their request.

Uses That Require Your Written Authorization

Other than the uses and disclosures described in this notice, we will not use or share your health information unless you give us written permission (an authorization). We will never sell your health information, use it for marketing purposes or share psychotherapy notes (if any exist) without your written authorization, except where the law allows. You may revoke an authorization at any time in writing, as described above.

Substance Use Disorder Treatment Records

Phoenix Behavioral Consulting does not provide substance use disorder treatment. If we receive substance use disorder treatment records about you or your child that are protected by federal law at 42 CFR Part 2, those records have additional protections:

- We will not use or share these records in investigations or in civil, criminal, administrative or legislative proceedings against you without (1) your written consent or (2) a court order together with a subpoena or similar legal requirement.
- We will use and share these records for treatment, payment and health care operations only as permitted by your written consent and by law.
- We do not use these records for fundraising.
- After we share information in a way the law permits, the person or organization that receives it may share it again, and it may no longer be protected by federal privacy rules.

Pennsylvania Law

When Pennsylvania law gives your health information more protection than federal law, including state laws that protect the confidentiality of behavioral health and mental health records, we follow the more protective law. This may mean we ask for your written consent before sharing information in situations where federal law alone would not require it.

Our Responsibilities

Phoenix Behavioral Consulting is required to:

- Maintain the privacy and security of your health information as required by law
- Provide you with a notice of our legal duties and privacy practices with respect to the information we collect and maintain about you
- Abide by the terms of this notice currently in effect
- Notify you if we cannot accommodate a requested restriction
- Accommodate your reasonable requests regarding methods to communicate health information with you
- Notify you promptly if a breach occurs that may have compromised the privacy or security of your information

Phoenix Behavioral Consulting reserves the right to amend, change or eliminate provisions in our privacy practices and to enact new provisions regarding the protected health information that we maintain. If our information practices change, we will amend this notice, and the new notice will apply to all information we have about you. You are entitled to receive a revised copy of the notice, which will be available on request, in our office and on our website.

To Request Information or to File a Complaint

If you have any questions or would like to report a problem regarding the handling of your information, please contact our Administrative Director:

Administrative Director, Phoenix Behavioral Consulting

825 Eden Road, Lancaster, PA

Phone: (717) 894-8388 · Email: hsadek@phoenixaba.org

If you believe that your privacy rights have been violated, you may file a written complaint by mailing it to our office or delivering it in person. You may also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting www.hhs.gov/ocr/privacy/hipaa/complaints/.

We will not retaliate against you for filing a complaint.

Uses and Disclosures with Neither Consent nor Authorization

Phoenix Behavioral Consulting may use or disclose PHI without your consent or authorization in the following circumstances:

Uses or Disclosures Required or Permitted by Law. We may use or disclose health information if the law requires us to use or disclose it for certain reasons. We may also disclose health information if a state law requires us to for auditing or monitoring situations and for licensing or certifying health care facilities or professionals.

Public Health Authorities. We may disclose your health information to public health authorities that need the information to prevent or control disease, injury or disability or to handle situations where children are abused or neglected.

Food and Drug Administration (FDA). We may disclose health information when there are problems with a product that is regulated by the FDA. For instance, when the product has harmed someone, is defective or needs to be recalled, we may disclose certain information.

Communicable Diseases. We may disclose health information to a person who has been exposed to a communicable disease or may be at risk of spreading or contracting a disease or condition.

Employment-Related Situations. We may disclose health information to an employer when the employer is allowed by law to have that information for work-related reasons. We may also disclose health information for workers' compensation programs.

Disclosures About Victims of Abuse, Neglect or Domestic Violence. We may disclose health information to appropriate authorities if we have reason to believe that a person has been a victim of abuse, neglect or domestic violence.

Disclosures for Health Care Oversight. We may disclose health information so that government agencies can monitor or oversee the health care system and government benefit programs and be sure that certain health care entities are following regulatory programs or civil rights laws as they should.

Disclosures for Judicial or Administrative Proceedings. We may disclose health information in a court or other type of legal proceeding if it is requested through a legal process, such as a court order or a subpoena.

Disclosures for Law Enforcement Purposes. We may disclose health information to law enforcement if it is required by law; if needed to help identify or locate a suspect, fugitive, material witness or missing person; if it is about an individual who is or is suspected to be the victim of a crime; if we think that a death may have resulted from criminal conduct; or if we think the information is evidence that criminal conduct occurred on our premises.

Uses or Disclosures in Situations Involving Decedents. We may use or disclose health information to coroners, medical examiners or funeral directors so that they can carry out their responsibilities.

Uses or Disclosures Relating to Organ Donation. We may use or disclose health information to organizations involved in organ donation or organ transplants.

Uses or Disclosures Relating to Research. We may use or disclose health information for research purposes if the privacy of the information will be protected in the research.

Uses or Disclosures to Avert a Serious Threat to Health or Safety. We may use or disclose your health information to appropriate persons or authorities if we have reason to believe it is needed to prevent or lessen a serious and imminent threat to the health or safety of a person or the public.

Uses or Disclosures Related to Specialized Government Functions. We may use or disclose health information to the federal government for military purposes and activities, national security and intelligence, or so it can provide protective services to the U.S. President or other official persons.

Uses or Disclosures to Those Involved in Paying for Your Care. We may disclose health information to a family member, other relative, close personal friend or any other individual you identify if that information is relevant to their involvement in paying for your health care. If possible, we will inform you in advance and allow you to prohibit or limit the disclosure of information to such persons.