Notice of Privacy Practices

Effective Date: September 23, 2026

Revive Counseling LLC
810 Dutch Square Blvd, Suite 207
Columbia, SC 29210
Phone: **803-216-5932**
Email: **info@revivecounselingllc.com**
Website: **www.revivecounselingllc.com**

Your Information. Your Rights. Our Responsibilities.

This Notice of Privacy Practices describes how Revive Counseling LLC ("Revive," "we," "us," or "our") may use and disclose your protected health information ("PHI"), your rights regarding your health information, and our responsibilities concerning the privacy and security of your information.

Please review this notice carefully.

If you have questions about this Notice of Privacy Practices or your privacy rights, please contact us at **803-216-5932** or **info@revivecounselingllc.com**.

Your Rights

When it comes to your health information, you have certain rights.

Get a copy of your health information

You have the right to inspect and obtain a copy of your PHI maintained by Revive, subject to certain exceptions under applicable law.

You may request your records in paper or electronic form. We will generally provide access within the time required by law, ordinarily within 30 days of receiving your request, subject to legally permitted extensions.

We may charge a reasonable, cost-based fee when permitted by law.

Certain psychotherapy notes, as defined by HIPAA, are maintained separately from the medical record and generally are not available through a general request for your medical record.

To request your records, contact Revive Counseling LLC at **803-216-5932** or **info@revivecounselingllc.com**.

Ask us to correct your health information

You may ask us to correct PHI that you believe is incorrect or incomplete.

We may deny your request in certain circumstances permitted by law. If we deny your request, we will provide you with a written explanation and information about your rights regarding the denial.

Request confidential communications

You may ask us to contact you in a particular way or at a particular location.

For example, you may ask us to contact you only by phone, only by mail, or at a particular address.

We will accommodate reasonable requests.

Ask us to limit what we use or disclose

You may ask us to limit how we use or disclose your PHI for treatment, payment, or health care operations.

We are not required to agree to every restriction request.

However, if you or someone on your behalf pays for a health care item or service entirely out of pocket and in full, you may request that we not disclose information concerning that item or service to your health plan for payment or health care operations purposes, and we will generally honor that request unless disclosure is otherwise required by law.

Get a list of certain disclosures

You have the right to request an accounting of certain disclosures of your PHI made by Revive during the period permitted by law.

The accounting generally does not include disclosures made for treatment, payment, or health care operations, disclosures made directly to you, disclosures made pursuant to your authorization, and certain other disclosures excluded by law.

Get a copy of this Notice

You may request a paper or electronic copy of this Notice of Privacy Practices at any time.

The current version of this Notice is available on our website at **www.revivecounselingllc.com** and is available upon request.

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 decisions regarding your health information to the extent authorized by law.

We will verify the person's authority before permitting access or taking action.

File a complaint

If you believe your privacy rights have been violated, you may file a complaint with Revive Counseling LLC.

You may also file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights.

You will not be retaliated against for filing a complaint.

Revoke an authorization

If you have signed an authorization permitting us to use or disclose your PHI, you may revoke that authorization in writing at any time, except to the extent we have already relied upon it.

To revoke an authorization, contact Revive Counseling LLC at **803-216-5932** or **info@revivecounselingllc.com**.

Your Choices

For certain health information, you can tell us your preferences about what we share.

Family members, friends, and others involved in your care

You may tell us whether we may share information with a family member, friend, or another person whom you identify as being involved in your care or involved in payment for your care.

If you are present and able to communicate your preference, we may obtain your agreement or provide you with an opportunity to object before making certain disclosures.

In an emergency or disaster-relief situation, we may disclose information when permitted by law and when necessary to respond to the circumstances.

Fundraising

Revive Counseling LLC does not currently conduct fundraising activities using PHI.

If this practice changes, we will comply with applicable federal and state requirements concerning fundraising communications.

Marketing

We will not use or disclose your PHI for marketing purposes without your written authorization when an authorization is required by HIPAA.

We will not sell your PHI.

If you provide a testimonial, review, photograph, statement, or other information to Revive, we will not use information that constitutes PHI for marketing or advertising purposes in a manner requiring authorization without obtaining the appropriate written authorization.

How We May Use and Disclose Your Health Information

HIPAA permits us to use or disclose your PHI without your written authorization in certain circumstances.

Treatment

We may use and disclose your PHI to provide, coordinate, or manage your health care.

For example, we may discuss your care with another health care professional involved in your treatment.

Payment

We may use and disclose your PHI to bill for services and obtain payment from a health plan or another entity responsible for payment.

Health Care Operations

We may use and disclose your PHI for health care operations, including activities necessary to operate and improve our practice, conduct quality-assessment activities, arrange for services, and manage our business.

Appointment Reminders and Health-Related Services

We may use and disclose your PHI to contact you about appointments, treatment alternatives, or other health-related services and benefits that may be of interest to you.

Public Health

We may disclose PHI for public-health activities when permitted or required by law, including certain activities involving disease reporting, public-health investigations, and reporting suspected abuse or neglect when legally required or permitted.

Health Oversight

We may disclose PHI to appropriate governmental agencies for health-oversight activities authorized by law, such as audits, investigations, inspections, licensing activities, and other oversight activities.

Judicial and Administrative Proceedings

We may disclose PHI in response to a court or administrative order and, when applicable HIPAA requirements are satisfied, in response to certain subpoenas, discovery requests, or other lawful processes.

We will disclose only the information permitted or required by applicable law.

Law Enforcement

We may disclose PHI for law-enforcement purposes when permitted by HIPAA and other applicable law and when the applicable legal conditions are satisfied.

A request from law enforcement does not by itself necessarily require or permit disclosure of PHI.

Serious Threat to Health or Safety

We may use or disclose PHI when permitted by law if we believe in good faith that the disclosure is necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public.

Abuse, Neglect, or Domestic Violence

We may disclose PHI when permitted or required by law concerning suspected abuse, neglect, or domestic violence.

Coroners and Medical Examiners

We may disclose PHI to a coroner or medical examiner as permitted by law to perform legally authorized duties.

Workers' Compensation

We may disclose PHI as necessary to comply with workers' compensation laws and other similar programs established by law.

Research

We may use or disclose PHI for research when permitted by applicable law and when the required protections and approvals are in place.

Organ and Tissue Donation

We may disclose PHI to organizations involved in organ, eye, or tissue donation and transplantation when permitted by law.

Specialized Government Functions

We may disclose PHI for certain specialized government functions, including military or veterans' activities, national security and intelligence activities, protective services, and correctional-institution activities, when permitted by law.

As Otherwise Required by Law

We may use or disclose PHI when required by applicable federal, state, or local law, subject to the limitations and requirements of that law.

Psychotherapy Notes

Psychotherapy notes are notes maintained separately from the medical record that document or analyze the contents of conversations during a private counseling session or a group, joint, or family counseling session.

Most uses and disclosures of psychotherapy notes require your written authorization.

There are limited exceptions under HIPAA, including certain uses by the mental health professional who created the notes for treatment, certain uses for training or supervision, certain uses in legal proceedings brought by the patient, certain disclosures required by law, certain health-oversight activities concerning the originator of the notes, disclosures to coroners or medical examiners, and disclosures necessary to prevent a serious threat to health or safety.

Psychotherapy notes are treated differently from the remainder of your medical record under HIPAA.

South Carolina Confidentiality Protections

In addition to federal HIPAA requirements, South Carolina law provides confidentiality and privilege protections concerning certain mental-health treatment communications and records.

Where applicable, Revive Counseling LLC will comply with South Carolina law and any other applicable federal or state law that provides greater privacy protection or imposes additional restrictions on disclosure.

South Carolina law provides that certain communications between patients and mental-health professionals are privileged, subject to specific statutory exceptions. South Carolina law also

establishes confidentiality requirements concerning certain mental-health records and identifies circumstances in which disclosure may be permitted or required.

Nothing in this Notice is intended to reduce or waive any confidentiality or privilege protection provided by applicable South Carolina law.

If you have questions about the confidentiality of a particular record or communication, please contact Revive at **803-216-5932** or **info@revivecounselingllc.com**.

Breach Notification

We are required by law to maintain the privacy and security of your PHI.

If a breach occurs that may have compromised the privacy or security of your PHI, we will notify you as required by applicable federal and state law.

Our Responsibilities

Revive Counseling LLC is required by law to:

- Maintain the privacy and security of your PHI.
- Provide you with this Notice describing our legal duties and privacy practices.
- Follow the terms of the Notice currently in effect.
- Notify you as required by law if a breach occurs that may have compromised the privacy or security of your PHI.
- Not use or disclose your PHI other than as described in this Notice or as otherwise permitted or required by law, unless you provide written authorization when authorization is required.

We reserve the right to change this Notice.

If we change this Notice, the revised Notice will apply to PHI we already maintain as well as PHI we receive or create in the future to the extent permitted by law.

The current version of this Notice will be posted on **www.revivecounselingllc.com** and will be available upon request.

Complaints

If you believe your privacy rights have been violated, you may file a complaint with Revive Counseling LLC.

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You may also file a complaint with:

U.S. Department of Health and Human Services
Office for Civil Rights

You may obtain information about filing a complaint through the HHS Office for Civil Rights.

Filing a complaint will not affect the care or services you receive from Revive.

Contact Us

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Last Updated: September 23, 2026

This Notice of Privacy Practices is provided in accordance with applicable federal and South Carolina privacy requirements. It does not replace applicable federal or state law.