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: September 16, 2026

This Notice describes how Learning Dynamics, Inc. may use and disclose your protected health information ("PHI") and explains your rights regarding that information.

Our Responsibilities

We are required by law to protect the privacy and security of your PHI, provide you with this Notice of our legal duties and privacy practices, follow the terms of the Notice currently in effect, and notify you if a breach occurs that may have compromised the privacy or security of your information. We reserve the right to change this Notice. Any revised Notice will apply to information we already maintain, as well as information we receive in the future. The current Notice will be available in our offices and on our website.

How We May Use and Disclose Your Information

Treatment: We may use and disclose your PHI to provide, coordinate, or manage your care. This may include sharing information within Learning Dynamics among clinicians, supervisors, trainees, and administrative staff involved in your treatment, scheduling, quality assurance, or support of your care. We may also share information with other health care providers involved in your care, when permitted or required by law.

Payment: We may use and disclose your PHI to bill and receive payment for services. For example, we may share information with your health plan, insurer, employee assistance program, school district, attorney, other third-party payer, or a collection agency working on our behalf, when applicable, to verify benefits, obtain authorization, submit claims, or collect payment.

Health Care Operations: We may use and disclose your PHI for health care operations, including supervision, training, quality improvement, peer review, licensing, accreditation, compliance, auditing, business management, and general administrative activities. We may also use secure technology tools, including AI-assisted software, to support documentation, communication, scheduling, billing, quality improvement, and other practice operations. When these tools create, receive, maintain, or transmit your PHI on our behalf, we require appropriate privacy and security protections as required by law.

Communications About Your Care: We may contact you regarding appointments, scheduling, billing, paperwork, or other matters related to your care using the contact methods you authorize, which may include phone, voicemail, email, text message, or patient portal messaging.

People Involved in Your Care: With your permission, or when otherwise allowed by law, we may share relevant information with a family member, legal guardian, personal representative, emergency contact, or another person involved in your care or payment for your care. In an emergency or urgent safety situation, we may use professional judgment to share information when appropriate.

Business Associates: We may share PHI with companies or individuals who provide services for us, such as electronic health record, billing, storage, transcription, practice management, technology, or legal/accounting support. These business associates are required to protect your information.

Uses and Disclosures Required or Permitted by Law

We may use or disclose your PHI without your written authorization when required or permitted by law, including:

- to report suspected child abuse or neglect;
- to report suspected abuse or neglect of a dependent adult or elder;
- when necessary to help prevent a serious threat to your health or safety or the health or safety of another person;
- for public health or health oversight activities;
- in response to a court order, subpoena, or other lawful process, as permitted or required by law; and
- for certain law enforcement, workers' compensation, or other legally authorized purposes.

Additional Protections

Some categories of information may receive additional protection under federal or California law, including psychotherapy notes and certain mental health treatment information.

Uses and Disclosures That Generally Require Your Written Authorization

We will not use or disclose your PHI for purposes not described in this Notice unless you give us written permission, except where permitted or required by law. Written authorization is generally required for:

- most uses and disclosures of psychotherapy notes;
- most uses or disclosures for marketing that are not otherwise permitted by law; and
- any sale of PHI.

You may revoke an authorization in writing at any time, except to the extent we have already relied on it.

Your Rights

You have the right to:

- request to inspect or obtain a copy of PHI maintained in the records we use to make decisions about you, subject to limited exceptions;
- request an amendment if you believe information in your record is incorrect or incomplete;
- request confidential communications by alternative means or at alternative locations;
- request restrictions on certain uses or disclosures of your PHI, although we are not required to agree in all cases;
- request that we not disclose information about a service to your health plan for payment or health care operations if you paid for that service out of pocket in full, unless disclosure is otherwise required by law;
- request an accounting of certain disclosures of your PHI;
- receive a paper copy of this Notice at any time, even if you agreed to receive it electronically; and
- have a person with legal authority act for you regarding your health information rights.

Complaints
If you believe your privacy rights have been violated, you may file a complaint with **Learning Dynamics, Inc.** by contacting: **Executive Director:** Nicole Brown or **Associate Director:** Lizeth Lopez at **Phone:** (310) 855-3276 **Fax:** (310) 393-9893 **Email:** info@learningdynamicsinc.org **Mailing Address:** 22837 Ventura Blvd., Suite 200, Woodland Hills, CA 91364.

You may also file a complaint with the **U.S. Department of Health and Human Services, Office for Civil Rights** by calling 1-877-696-6775, or visiting www.hhs.gov/ocr/privacy/hipaa/complaints/. We will not retaliate against you for filing a complaint.

Complaints about a clinician's professional conduct may also be directed to the clinician's licensing board, when applicable, including the **CA Board of Psychology** for psychologists and the **CA Board of Behavioral Sciences** for marriage and family therapists. If you are unsure which board regulates your clinician, please ask us and we will provide that information.

Questions: If you have questions about this Notice or our privacy practices, please contact us at **Phone:** (310) 855-3276 or **Email:** info@learningdynamicsinc.org

Acknowledgment of Receipt/Review of Notice of Privacy Practices
I acknowledge that I was provided access to and had the opportunity to review Learning Dynamics, Inc.'s Notice of Privacy Practices. I understand that this acknowledgment is only confirmation that I received or reviewed the Notice of Privacy Practices. It is not an authorization for uses or disclosures of my information beyond those permitted or required by law.