



THE LAKEWOOD GROUP, LLC

Mental Health Services

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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.

This Notice applies to all records of your care created or maintained by The Lakewood Group, including services provided in person or through telehealth.

I. Our Responsibilities

We are required by law to:

- Maintain the privacy and security of your protected health information (PHI).
- Provide you with this Notice of our legal duties and privacy practices.
- Notify you promptly if a breach occurs that may compromise the privacy or security of your information.
- Follow the duties and privacy practices described in this Notice.
- We reserve the right to change our privacy practices and the terms of this Notice at any time. Any revised Notice will apply to all information we maintain and will be available upon request, in our office, and on our website.

The Lakewood Group reserves the right to change this Notice at any time. Any revised Notice will apply to all PHI we maintain and will be available in our office and on our website.

II. How We May Use and Disclose Your Information

We may use or disclose your PHI for the following purposes without additional authorization:

Treatment

To provide, coordinate, or manage your health care and related services. This includes consultation with other healthcare providers.

Examples:

- Consultation among clinicians within our group practice.
- Coordination with your primary care provider or psychiatrist.
- Referrals to other healthcare providers.

Payment

To obtain payment for services provided, including billing insurance companies or determining eligibility or coverage.

Examples:

- Submitting claims to your insurance company.
- Verifying coverage or eligibility.
- Collecting outstanding balances.

Health Care Operations

For practice operations such as quality assessment, training, licensing, accreditation, business management, and administrative activities. These uses are necessary to run our practice and ensure quality care.

Examples:

- Quality assessment and improvement.
- Case review and peer consultation.
- Clinical supervision.
- Staff training.
- Licensing and accreditation activities.
- Compliance audits.
- Business planning and management.
- Resolving complaints.

III. Telehealth and Electronic Communications

We may communicate with you electronically for purposes of scheduling, treatment coordination, billing, or telehealth services. This may include:

- Secure video platforms.
- Patient portals.
- Email or text messaging (when permitted).

While we use reasonable safeguards, electronic communication carries some risk. By participating in telehealth or electronic communication, you acknowledge these risks.

IV. Uses and Disclosures Requiring Your Written Authorization

We will obtain your written authorization before:

- Releasing psychotherapy notes (except where permitted by law).
- Using or disclosing information for marketing purposes.
- Selling your health information.
- Disclosing information for purposes not described in this Notice.
- You may revoke authorization at any time in writing, except where we have already relied on it.

V. Uses and Disclosures Without Authorization (As Required or Permitted by Law).

We may disclose your PHI without authorization in certain circumstances, including:

- Abuse or Neglect Reporting.
- Child abuse or neglect must be reported to the Texas Department of Family and Protective Services.
- Abuse, neglect, or exploitation of elderly or disabled persons must also be reported.

- Health Oversight activities.
- To licensing boards or regulatory agencies overseeing healthcare providers.
- Judicial or Administrative Proceedings.
- If ordered by a court or required by law.
- Serious Threat to Health or Safety
- If necessary to prevent a serious and imminent threat to you or others.
- Workers Compensation claims, as required to comply with workers' compensation laws.
- Law enforcement purposes.
- Coroners or medical examiners.

VI. Your Rights Regarding Your Health Information.

You have the right to:

- Request Restrictions.
- Ask us to limit how we use or disclose your PHI. We are not required to agree, except when you pay out-of-pocket in full and request, we not bill your health plan.
- Confidential Communications.
- Request that we contact you in a specific way (for example, only by phone or at a specific address).
- Access Your Records.
- Inspect or obtain a copy of your health records in paper or electronic form.
- Request Amendments to: Incorrect diagnoses, Wrong medications listed, Errors in personal details (like date of birth)., and/or missing or incomplete medical history.
- Ask us to correct information you believe is inaccurate or incomplete.
- Accounting of Disclosures
- Receive a list of certain disclosures we have made of your PHI.
- Receive paper copy of this notice.
- Receive a paper copy even if you agreed to receive it electronically.
- Notification of Breach.
- Be notified if your unsecured PHI has been breached.

VII. Special Protections for Mental Health Information.

Psychotherapy notes receive additional protections under federal law. These notes are maintained separately from your clinical notes and generally require your authorization for release.

VIII. Substance Use Treatment Records (If Applicable)

If we provide substance use disorder treatment, certain records may be protected by federal law (42 CFR Part 2). These records will not be disclosed without your specific written authorization unless otherwise permitted by law.

VIII. Complaints

If you believe your privacy rights have been violated, you may file a complaint with:

Gena Schuemaker
Office Manager
The Lakewood Group, LLC
2237 Ridge Rd Ste 101 Rockwall Tx 75087-5161
(972) 771-3969 ext. 204
gena@lakewoodgroup.net

U. S. Department of Health and Human Services, Office for Civil Rights, at:
OCRMail@hhs.gov

The Texas Office of the Attorney General at:

<https://www.texasattorneygeneral.gov/consumer-protection/health-care/patient-privacy>

or call (800) 621-0508

You will not be penalized or retaliated against for filing a complaint.

IX. State Law

We follow applicable federal law and the laws of the State of Texas. When state law provides greater privacy protections, we will follow state law.

X. Effective Date

This Notice is effective: February 1, 2026