



WASHINGTON
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Office of Attorney General
Maryland Attorney General's Consumer Protection Division
200 St. Paul Place
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consumer@oag.state.md.us

Re: May 1, 2024, Email Incident

Dear Sir/Madam,

This letter is to advise you that on May 1, 2024, a breach incident occurred which was immediately identified, and we believe to have been appropriately resolved.

The incident involved an email which was sent by a psychology doctoral candidate to me as the clinical supervisor in connection with a treatment program. The email contained FLMA attachments of two clients, [REDACTED]. That email sent to me by the doctoral candidate erroneously included one of the clients, [REDACTED] as a copied recipient of the email with the two attachments- one which contained his information and one which contained information on another client, [REDACTED]. The attachment of the client, K.B., which contained personally identifiable information (PII) and protected health information (PHI) but limited to the following: employee name/name of the client as [REDACTED] (full name provided); name and contact information for the health care provider as myself with my contact information at that time; type of practice/medical specialty as "psychology"; date condition started or will start as "March 22, 2024"; best estimate of how long the condition started or will last as "Indeterminate"; brief description of appropriate medical facts for which the employee seeks medical leave as [REDACTED] (first name provided) is currently in therapeutic treatment for acute grief and anxiety. She is currently in need of time to recuperate and focus on healing"; planned medical treatments as "twice weekly appointments that began on 3/20/24 The current provider is leaving the practice and she will be referred to another provider at the end of May 2024."; with best estimate of treatment beginning date as "03/22/24" and end date as "05/24/2024"; best estimate of the duration of treatments as "3-6 months but may last longer. We would like for [REDACTED] (first name provided) to be approved for at least 12 weeks of leave as she recovers."; best estimate of the reduced schedule the employee is able to work as "upon return from FMLA leave we recommend that [REDACTED] (first name provided) resume at a reduced, part-time schedule"; due to the condition, the patient "will be" incapacitated for a continuance period of time; and, due to her condition the employee "will not be able" to perform as "She will need to be absent for 12 weeks and will not be able to perform all essential functions for that time." The quoted sections were inputted in the areas of the form sections as described. The attachment was signed by me as the supervising psychologist on April 26, 2024, although the May 1, 2024 email transmission which erroneously copied and provided the form to [REDACTED] was done by the doctoral candidate. I am reporting this incident as the then supervising psychologist and on behalf of the program.



Upon discovery of the error on that same day, May 1, 2024, there was immediate communication with the erroneously receiving client, [REDACTED]. On that same day, May 1, 2024, [REDACTED] confirmed that he deleted the information and based on our risk assessment and the reliability of the confirmation of deletion, we believe it is reasonable to think the information was not used and is not usable. Additionally, the client, [REDACTED], has been informed that her data was breached, information regarding the nature and scope of the breach, and that we have received reasonable assurances that her PII and PHI have not and will not be used. Further, we have offered [REDACTED] counseling and resources in the event she has any concerns or issues regarding the reported breach.

While the transmitted document only included the client's full name but no other personally identifiable information or diagnoses, it did contain the above protected health information of treatment for grief and anxiety with anticipated treatment duration and resulting work limitations. Therefore, in an abundance of caution and to ensure compliance with regulatory requirements and applicable laws, we voluntarily report this occurrence. We acted immediately and have attempted to mitigate the risk and resolve this incident in a timely and appropriate way.

Please advise us if you would like further information or any additional action to be taken by us. Thank you.

Very Truly Yours,

A handwritten signature in black ink, appearing to read "Jaclyn Halpern", with a small square box drawn around the first few letters of the last name.

Jaclyn Halpern, Psy.D.

Partner & Clinical Director of Psychology

Psychology Supervisor

Licensed Psychologist MD, DC, VA, DE; PsyPact* approved

Formerly: Director of the SOAR Program for Psychotherapy and Testing at WBMA LLC
5480 Wisconsin Ave, Suite 223, Chevy Chase, MD 20815 (where event occurred)

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Pronouns: She/Her

Authority to Practice Interjurisdictional Telepsychology (APIT) under the PSYPACT
Commission E. Passport issued 6/14/21 Mobility Number#8206