

Notice of Psychologists' Policies and Practices to Protect the Privacy of Your Health Information

THIS NOTICE DESCRIBES HOW PSYCHOLOGICAL AND MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

I. Uses and Disclosures for Treatment, Payment, and Health Care Operations

Psychoeducational Clinic personnel may *use or disclose* your *protected health information (PHI)*, for *treatment, payment, and health care operations* purposes with your *consent*. PHI may also be used for purposes of research but in no case will the PHI be identifiable by name. To help clarify these terms, here are some definitions:

- "PHI" refers to information in your health record that could identify you.
- "Treatment, Payment and Health Care Operations "
 - *Treatment* is when Clinic personnel provide, coordinate or manage your health care and other services related to your health care. An example of treatment would be when Clinic personnel consult with another health care provider, such as your family physician or another psychologist.
 - *Payment* is when Clinic personnel obtain reimbursement for your healthcare. Examples of payment are when Clinic personnel disclose your PHI to your health insurer to obtain reimbursement for your health care or to determine eligibility or coverage. Currently Clinic personnel do not file directly with health insurers but provide information to you so that you may do so.
 - *Health Care Operations* are activities that relate to the performance and operation of Clinic practice. Examples of health care operations are quality assessment and improvement activities, business-related matters such as audits and administrative services, and case management and care coordination.
- "*Use*" applies only to activities within the Clinic such as sharing, employing, applying, utilizing, examining, and analyzing information that identifies you.
- "*Disclosure*" applies to activities outside of the Clinic such as releasing, transferring, or providing access to information about you to other parties.

II. Uses and Disclosures Requiring Authorization

Clinic personnel may use or disclose PHI for purposes outside of treatment, payment, and health care operations when your appropriate authorization is obtained. An "*authorization*" is written permission above and beyond the general consent that permits only specific disclosures. In those instances when Clinic personnel are asked for information for purposes outside of treatment, payment and health care operations, Clinic personnel will obtain an authorization from you before releasing this information.

You may revoke all such authorizations of PHI at any time, provided each revocation is in writing. You may not revoke an authorization to the extent that (1) Clinic personnel have relied on that authorization; or (2) if the authorization was obtained as a condition of obtaining

insurance coverage, and the law provides the insurer the right to contest the claim under the policy.

III. Uses and Disclosures with Neither Consent nor Authorization

Clinic personnel may use or disclose PHI without your consent or authorization in the following circumstances:

- **Child Abuse:** If you give Clinic personnel information which leads us to suspect child abuse, neglect, or death due to maltreatment, we must report such information to the county Department of Social Services. If asked by the Director of Social Services to turn over information from your records relevant to a child protective services investigation, Clinic personnel must do so.
- **Adult and Domestic Abuse:** If information you give us gives us reasonable cause to believe that a disabled adult is in need of protective services, Clinic personnel must report this to the Director of Social Services.
- **Health Oversight:** The North Carolina Psychology Board has the power, when necessary, to subpoena relevant records should Clinic personnel be the focus of an inquiry.
- **Judicial or Administrative Proceedings:** If you are involved in a court proceeding, and a request is made for information about the professional services that Clinic personnel have provided you and/or the records thereof, such information is privileged under state law, and Clinic personnel must not release this information without your written authorization, or a court order. This privilege does not apply when you are being evaluated for a third party or where the evaluation is court ordered. You will be informed in advance if this is the case.
- **Serious Threat to Health or Safety:** Clinic personnel may disclose your confidential information to protect you or others from a serious threat of harm by you.
- **Worker's Compensation:** If you file a workers' compensation claim, Clinic personnel are required by law to provide your mental health information relevant to the claim to your employer and the North Carolina Industrial Commission.

IV. Patient's Rights and Psychologist's Duties

Patient's Rights:

- **Right to Request Restrictions** -You have the right to request restrictions on certain uses and disclosures of protected health information about you. However, Clinic personnel are not required to agree to a restriction you request.
- **Right to Receive Confidential Communications by Alternative Means and at Alternative Locations** -You have the right to request and receive confidential communications of PHI by alternative means and at alternative locations. (For example, you may not want a family member to know that you are seeing us. Upon your request, Clinic personnel will send your bills to another address.)
- **Right to Inspect and Copy** -You have the right to inspect or obtain a copy (or both) of PHI in our mental health and billing records used to make decisions about you for as long

as the PHI is maintained in the record. Clinic personnel may deny your access to PHI under certain circumstances, but in some cases, you may have this decision reviewed. On your request, Clinic personnel will discuss with you the details of the request and denial process.

- **Right to Amend** -You have the right to request an amendment of PHI for as long as the PHI is maintained in the record. Clinic personnel may deny your request. On your request, Clinic personnel will discuss with you the details of the amendment process.
- **Right to an Accounting** -You generally have the right to receive an accounting of disclosures of PHI for which you have neither provided consent nor authorization (as described in Section III of this Notice). On your request, Clinic personnel will discuss with you the details of the accounting process.
- **Right to a Paper Copy**- You have the right to obtain a paper copy of the notice from us upon request, even if you have agreed to receive the notice electronically.

Psychologist's Duties:

Clinic personnel are required by law to maintain the privacy of PHI and to provide you with a notice of our legal duties and privacy practices with respect to PHI.

V. Complaints

If you are concerned that Clinic personnel have violated your privacy rights, or you disagree with a decision Clinic personnel made about access to your records, you may contact us at (919) 515-1713.

You may also send a written complaint to the Secretary of the U.S. Department of Health and Human Services. Clinic personnel will provide you with the appropriate address upon request.

VI. Effective Date, Restrictions, and Changes to Privacy Policy

- This notice will go into effect on April 14, 2003
- Clinic personnel reserve the right to change the terms of this notice and to make the new notice provisions effective for all PHI that we maintain. Unless Clinic personnel notify you of such changes, however, we are required to abide by the terms currently in effect. Clinic personnel will provide you with a revised notice in person or by U.S. Mail.