

NOTICE OF PRIVACY PRACTICES

THIS NOTICE DESCRIBES HOW MENTAL HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION.

PLEASE REVIEW IT CAREFULLY

Understanding Your Mental Health Record Information:

Each time you visit a mental health care provider, the provider makes a record of your visit. Typically, this record contains your history, current symptoms, diagnosis, and a treatment plan. This information, often referred to as your mental health record, serves as a:

- *basis of planning your care and treatment.
- *means of communication among professionals who contribute to your care.
- *legal document describing the care you received.
- *means by which you or a third-party payer can verify that you actually received the services billed for.
- *a tool to assess the appropriateness and quality of care you received
- *a tool to improve the quality of mental health care and achieve better outcomes.

Understanding what is in your mental health records and how this information is used will help you to:

- *ensure its accuracy and completeness.
- *understand who, what, where, why and how others may access your record
- *make informed decisions about authorizing disclosure to others.
- *better understand the mental health information rights detailed below.

We will not use or disclose your mental health information without your authorization, except as described in this notice or otherwise required by law.

Uses and Disclosures: With the regulatory consent granted by the Department of Health and Human Services we may use or disclose your mental health information for treatment, payment, and operations.

Treatment: Your counselor will record information in your record about the issues that you wish to discuss and the treatment plan that you develop together to address these issues. He/she will then document actions taken and observations of each session in order to determine whether or not you are progressing toward your goals.

Payment: Your mental health information may be used to seek payment from your health plan. For example, your mental health plan may request and receive information on dates of services, the services provided and the mental health condition being treated.

Health Care Operations: Your mental health information (which has been de-identified) may be used as necessary to support the day-to-day activities and management of Family Counseling Service. For example, information on the services you received may be used to assess the care and outcomes in your case and the competence of the counselor/advocate. We will use this information in an effort to continually improve the quality and effectiveness of our services.

Uses and Disclosures Other than for Treatment, Payment or Health Care Operations:

Law Enforcement: We may disclose mental health information for purposes as required by law or in response to a valid subpoena.

Public Health Reporting: Your mental health information may be disclosed to public health or legal authorities charged with preventing or controlling disease, injury, or disability.

Workers Compensation: We may disclose health information to the extent authorized by and to the extent necessary to comply with laws relating to workers compensation or other similar programs established by law.

Correctional Institution: Should you be an inmate of a correctional institution, we may disclose to the institution or agency thereof mental health information necessary for your mental health and the health and safety of other individuals.

Health Oversight Agencies and Public Health Authorities: If a member of our work force or a business associate believes in good faith that we have engaged in unlawful conduct or otherwise violated professional or clinical standards and are potentially endangering one or more patients, workers or the public, they may disclose your mental health information to health oversight agencies and/or public health authorities such as the Department of Health.

The Federal Department of Health and Human Services (DHHS): Under the privacy standards, we must disclose your mental health information to DHHS as necessary for them to determine our compliance with those standards.

Other uses and disclosures require your authorization: Disclosure of your mental health information or its use for any purpose other than those listed above requires your specific written authorization. If you change your mind after authorizing a use or disclosure of your information you may submit a written revocation of the authorization. However, your decision to revoke the authorization will not affect or undo any use or disclosure of information that occurred before you notified us of your decision.

Continuity of Care: We may contact you to provide appointment reminder, or you or your child may be given a school/work excuse for missed time due to an appointment. We may contact you after services have been completed regarding your satisfaction with our services.

Individual Rights:

You have certain rights under the federal privacy standards. These include:

- * The right to request restrictions on the use and disclosure of your protected mental health information; we are not required to accept the restrictions. However, if accepted, we will comply with the restrictions.
- * The right to receive confidential communications concerning your mental health condition and treatment.
- * The right to inspect and copy your protected mental health information.
- * The right to amend or submit corrections to your protected mental health information. Amendments to your information may be limited; the Privacy Officer will notify you of any changes that cannot be made and why. If your information is corrected, we will endeavor to identify any party who received the incorrect information and provide them with the corrected information.
- * The right to receive an accounting of how and to whom your protected mental health information has been disclosed. Contact the Privacy Officer so that you may fill out a written request, and please allow 60 days.
- * The right to receive a printed copy of this notice.

Limitations on Individual Access:

Access to your protected mental health information may be limited or restricted in the following circumstances:

- * Psychotherapy notes
- * Information compiled in anticipation of, or for use in, a civil, criminal or administrative action or proceeding.
- * Information that was obtained from someone other than a health care provider under a promise of confidentiality and release of the information would likely reveal the source.

Should your access to your information be limited or restricted, you may have the denial reviewed by the Privacy Committee.

Family Counseling Service Duties:

We are required by law to maintain the privacy of your protected mental health information and to provide you with this notice of privacy practices.

We are also required to abide by the privacy policies and practices that are outlined in this notice.

We are required to train our personnel concerning privacy and confidentiality and implement a sanction policy to discipline those who breach privacy/confidentiality or our policies with regard to them.

Right to Revise Privacy Practices:

As permitted by law, we reserve the right to amend or modify our privacy policies and practices. These changes in our policies and practices may be required by changes in Federal and State laws and regulations. Whatever the reason for these revision, we will

provide you with a revised notice on your next office visit. The revised policies and practices will be applied to all protected mental health information that we maintain.

Requests to Inspect Protected Mental Health Information:

As permitted by Federal regulation, we require that requests to inspect or copy protected mental health information be submitted in writing. You may obtain a form to request access to your records by contacting Maria Graciano, Director of Clinical Programs, Family Counseling Service Privacy Officer.

Please know that it is permitted by law to charge a reasonable fee for copying and expenses related to a request for protected mental health information and records.

Complaints:

If you would like to submit a comment or complaint about our privacy practices, you can do so by sending a letter outlining your concerns to:

Maria Graciano, MS, LPC-S, RPT-S
Family Counseling Service
3833 S. Staples, Suite S-203
Corpus Christi, TX 78411
(361) 852-9665

If you believe that your privacy rights have been violated, you should call the matter to our attention by sending a letter describing the cause of your concern to the same address. You will not be penalized or otherwise retaliated against for filing a complaint.

The above mentioned person is also the person you can contact for further information concerning our privacy practices.

Effective Date:

This notice is effective as of April 14, 2003.