



## 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 CAREFULLY:

If you have any questions about this notice, please contact the Counseling Associates, LLC professional who is treating you.

#### WHO WILL FOLLOW THIS NOTICE:

This notice describes Counseling Associates' practices, how all entities, sites, and locations will follow the terms of this notice, and how these entities, sites, and locations may share medical information with each other for treatment, payment, and operations.

This notice tells you about the ways in which we may use and disclose medical information about you. We also describe your rights and certain obligations we have regarding the use and disclosure of your medical information.

#### OUR PLEDGE REGARDING MEDICAL INFO:

We understand that medical information about you and your health is personal. We are committed to protecting medical information about you. We create a record of the care and services you receive at this center. We need this record to provide you with quality care and to comply with certain legal requirements. This notice applies to all of the records of your care generated by Counseling Associates, LLC, whether made by personnel or your therapist.

We are required by law to:

- Make sure that medical information that identifies you is kept private
- Give you this notice of our legal duties and privacy practices with respect to medical information about you; and
- Follow the terms of the notice that is currently in effect

#### HOW MAY WE USE AND DISCLOSE MEDICAL INFORMATION ABOUT YOU:

The following categories describe different ways that we use and disclose medical information. For each category of uses or disclosures, we will explain what we mean. Not every use or disclosure in a category will be listed. However, all of the ways we are permitted to use and disclose information will fall within one of the categories.

Coroners, Medical Examiners and Funeral Directors We may release information to a coroner, medical examiner, or funeral director. This may be necessary to identify a deceased person or determine the cause of death.

National Security and Intelligence Activity We may release information about you to authorized federal officials for intelligence, counterintelligence, and other national security activities authorized by law.

Protective Services for the President and Others We may disclose medical information about you to authorized general officials so they may provide protection to the President, other authorized persons, or foreign heads of state or conduct special investigations.

Inmates If you are an inmate of a correctional institution or under the custody of a law enforcement official, we may release medical information about you to the correctional institution or law enforcement official. This release would be necessary (1) for the institution to provide you with health care; (2) to protect your health and safety or the health and safety of others; or (3) for the safety of the correctional institution.

Business Associates We may disclose your health information to a business associate whom we contract with to provide services on our behalf. To protect your health information, we require our business associates to appropriately safeguard the health information of our clients.

**For Treatment** We may use information about you to provide you with treatment or services. We may disclose information about you to doctors, therapists, nurses, case managers, medical students, or other personnel who are involved in taking care of you.

**For Payment** We may use and disclose information about you so that the treatment and services you receive may be billed to and payment collected from and insurance company, you, or a third party.

**Family and Friends** We may use or disclose information to a family member, a personal representative or another person responsible for your care. We may also give information to someone who helps pay for your care. In addition, we may disclose medical information about you to an entity assisting in a disaster relief effort so that your family can be notified about your condition, status, and location.

**For Health Care Operations** We may use and disclose information about you for our agency's operations, to make sure that all of our patients receive quality care. For example, we may use medical information to review our treatment and services and to evaluate the performance of our staff in caring for you. We may also combine information from other mental health facilities to decide if additional services should be offered and what services may be needed. We may also disclose information to doctors, therapists, nurses, medical students, and other staff for review and learning purposes.

**Appointment Reminders** We may use and disclose information to contact you as a reminder that you have an appointment.

**Treatment Alternatives** We may use and disclose information to tell you about or recommend possible treatment options or alternatives that may be of interest to you.

**Health Related Benefits and Services** We may use and disclose information to tell you about health-related benefits or services that may be of interest to you.

**Research** Under certain circumstances, we may use and disclose information about you for research purposes. For example, a research project may involve comparing the health and recovery of all patients who received one medication to those who received another, for this same condition. All research projects, however, are subject to a special approval process. This process evaluates a proposed research project and its use of medical information, trying to balance the research needs with patients' need for privacy of their information. Before we use or disclose medical information for research, the project will have been approved through a research approval process, but we may, however, disclose information about you to people preparing to conduct a research project, for example, to help them look for patients with specific needs so long as the information they review does not leave Counseling Associates, LLC. We will almost always ask for your specific permission if the researcher will have access to your name, address, or other information that reveals who you are, or will be involved in your care.

**As Required By Law** We will disclose information about you when required to do so by federal, state, or local law. For example, Ombudsman, Child Protection, and a Valid Court Order.

**To Avert a Serious Threat to Health or Safety** We may use or disclose information about you when necessary to prevent a serious threat to your health and safety or the

health and safety of the public or another person. Any disclosure, however, would only be to someone able to help prevent the threat.

### Special Situations:

**Military and Veterans** If you are a member of the armed forces, we may release information about you as required by military command authorities. We may also release information about foreign military personnel to the appropriate foreign military authority.

**Workers' Compensation** We may release information about you for workers' comp or similar programs. These programs provide benefits for work-related injuries or illnesses.

**Public Health Risks** We may disclose medical information about you for public health activities. These activities generally include the following:

- To prevent or control disease
- To report birth, deaths, and serious injuries
- To report child abuse or neglect.
- To report reactions to medications or problems with products
- To notify people of recalls of products they may be using
- To notify a person who may have been exposed to disease or may be at risk for contracting or spreading a disease or condition
- To notify the appropriate government authority if we believe a patient has been the victim of abuse, neglect, or domestic violence. We will only make this disclosure if you agree or when required or authorized by law

**Health Oversight Activities** We may disclose medical information to a health oversight agency for activities authorized by law. These oversight activities include, for example, audits, investigations, inspections, and licensure. These activities are necessary for the government to monitor the health care system, government programs, and compliance with civil rights laws.

**Law and Disputes** If you are involved in a lawsuit or a dispute, we may disclose information about you in response to a court or administrative order. We may disclose medical information about you in response to a subpoena, discovery request, or other lawful process by someone else involved in the dispute, but only if efforts have been made to tell you about the request or to obtain an order protecting the information requested.

**Law Enforcement** We may release medical information if asked to do so by law enforcement officials:

- In response to a court order, subpoena, warrant, summons or similar process.
- To identify or locate a suspect, fugitive, material witness, or missing person.
- About the victim of a crime if, under certain limited circumstances, we are unable to obtain the person's agreement.
- About a death we believe may be the result of criminal conduct.
- About criminal conduct at Counseling Associates
- In emergency circumstances to report a crime, the location of the crime or victims, the identity, description or location of the person who committed the crime.