

CENTRAL UTAH COUNSELING CENTER

NOTICE OF PRIVACY PRACTICES

Central Utah Counseling Center is committed to protecting your medical information.

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

Effective April 14, 2003. Central Utah Counseling Center is required by law to maintain the privacy of your medical information, provide this notice to you, and abide by the terms of this notice.

HOW WE USE YOUR HEALTH INFORMATION

When you receive care from Central Utah Counseling Center, we may use your health information for treating you, billing for services, and conducting our normal business known as health care operations. Examples of how we use your information include:

Treatment- We keep records of the care and services provided to you. Health care providers use these records to deliver quality care to meet your needs. For example, your therapist may share your health information with another practitioner who will assist in your treatment. Some health records, including confidential communications with other mental health professionals or substance abuse treatment records may have additional restrictions for use and disclosure under state and federal laws.

Payment- We keep billing records that include payment information and documentation of the services provided to you. Your information may be used to obtain payment from you, your insurance company, or other third party payers. We may also contact your insurance company to verify coverage for your care or to notify them of upcoming services that may need prior notice or approval. For example, we may disclose information about the services provided to you to claim and obtain payment from your insurance company. If you pay full cash price for services, you may request a restriction of information to your insurance company.

Health Care Operations- We use health information to improve the quality of care, train staff and students, provide customer service, manage costs, conduct required business duties, and make plans to better serve our communities. For example, we may use your health information to evaluate the quality of treatment and services provided by our therapists, psychiatrists, psychologists, case managers, and other health care workers.

OTHER SERVICES WE PROVIDE

We may also use your health information to recommend treatment alternatives, tell you about health services and products that may benefit you, share information with family and friends involved in your care (authorized by you through a written release), share information with third parties who assist us with treatment, payment, and health care operation, and remind you of an appointment (optional, notify the therapist or secretary if you do not wish to be reminded). Also, CUCC utilizes electronic prescribing. One of the features of electronic prescribing systems is that it allows us to view medications that have been electronically prescribed to you by other physicians. This improves patient safety by helping us avoid prescribing medications that might interfere with what you are already taking. By signing the acknowledgement form that you received this form, you authorize us to view your medication history.

YOUR INDIVIDUAL RIGHTS

You have the right to:

- Request restrictions on how we use and share your health information. We will consider all requests for restrictions carefully, but are not required to agree to any restriction.
- Request that we use a specific telephone number or address to communicate with you.

- Inspect and copy your health information, including billing records. There is a charge of \$.25 per page copied. Under limited circumstances, we may deny you access to a portion of your health information and you may request a review of the denial.*
- Request corrections or additions to your health information.*
- Request an accounting of certain disclosures of your health information made by us. The accounting does not include disclosures made for treatment, payment, and health care operations and some disclosures required by law. Your request must state the period of time desired for the accounting, which must be within the six years prior to your request and excludes dates prior to April 14, 2003. The first accounting is free, but a fee will apply if more than one request is made in a 12 month period.*

Requests marked with a star (*) must be made in writing. Contact the Central Utah Counseling Center Privacy Officer for the appropriate form for your request.

SHARING YOUR HEALTH INFORMATION

- There are limited situations when we are permitted or required to disclose health information without your signed authorization. These situations include activities necessary to administer the Medicaid program and the following:
 - Emergency situation requiring immediate care. For public health purposes such as reporting communicable diseases (if such diseases have not been reported by the health department), or other diseases and injuries permitted by law.
 - To protect victims of abuse, neglect, or domestic violence.
 - For health oversight activities such as investigations, audits, and inspections.
 - For lawsuits and similar proceedings.
 - When otherwise required by law.
 - When requested by law enforcement as required by law or court order.
 - For research approved by our review process under strict federal guidelines.
 - To reduce or prevent a serious threat to public health and safety.
 - For specialized governmental functions such as intelligence and national security.

All other uses and disclosures, not described in this notice, require your signed authorization. You may revoke your authorization at any time with the written statement. The following are examples:

- Most uses and disclosures of psychotherapy notes
- Uses and disclosures of protected health information for marketing purposes, including subsidized treatment.
- Disclosures that constitute a sale of protected health information.

OUR PRIVACY RESPONSIBILITIES

Central Utah Counseling Center is required by law to:

- Maintain the privacy of your health information and notify you of any breach of information.
- Provide this notice that describes the ways we may use and share your health information.
- Follow the terms of the notice currently in effect.

We reserve the right to make changes to this notice at any time and make the new privacy practices effective for all information we maintain. Current notices will be posted in all our offices. You may also request a copy of any notice from the secretary or the Central Utah Counseling Center Privacy Officer listed below:

CONTACT US

If you would like further information about your privacy rights, are concerned that your privacy rights have been violated, or disagree with a decision that we made about access to your health information, contact the Central Utah Counseling Center Privacy Officer-Nathan Strait 152 North 400 West, Ephraim, UT 84627 1-800-523-7412 or email: nathans@cucc.us

We will investigate all complaints and will not retaliate against you for filing a complaint.

You may also file a written complaint with the Office of Civil Rights, 200 Independence Avenue, S.W. Room 509F HHH Bldg., Washington, D.C. 20201.