#### Growing Peace Counseling Intake Paperwork: Confidentiality Information

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 and do not hesitate to ask for clarification.

#### **Definitions**

These are technical definitions in accordance with the federal Health Insurance Portability & Accountability Act (HIPAA) Privacy Rule that you will need to know to understand this document.

\* For purposes of clarity, please know that "patient" is equivalent to "client" in our setting.

GPC:

Abbreviation for Growing Peace Counseling

Protected Health Information (PHI):

PHI is (with certain exceptions) individually identifiable health information regarding the patient.

*Psychotherapy Notes:* 

Notes recorded (in any medium) by a therapist documenting or analyzing the contents of a conversation with a patient or patients during a private counseling session or a group, joint, or family session.

Use:

Sharing, employment, application, utilization, examination, or analysis of individually identifiable health information within an entity (e.g., the therapist's office).

Disclosure:

Release of, transfer of, provision of access to, or divulging in any other manner, information outside the entity holding the information.

*Treatment:* 

Provision, coordination, or management of mental health care and related services by one or more care providers. This can include the coordination or management of your mental health care by a care provider with a third party, consultation between providers relating to a patient, or the referral of a patient for mental health care from one provider to another.

Payment:

When the therapist obtains reimbursement for the provision of mental health care. For example, obtaining third-party reimbursement or the determinations of eligibility or coverage (including coordination of benefits or the determination of cost sharing amounts).

# Health Care Operations:

Activities that relate to the performance or operation of the therapist's practice. Examples include conducting quality assessment and improvement activities, including outcomes evaluations and development of clinical guidelines; protocol development, case management and care coordination. Business-related matters such as administrative services; and related functions that do not include treatment.

### **HIPAA Privacy Policies**

#### I. General Policies Regarding Privacy of PHI:

- GPC follows policies and procedures in compliance with both federal regulations of the HIPAA Privacy Rule, and Oregon State Law.
- GPC does not use or disclose PHI in violation of the HIPAA Privacy Rule or Oregon State Law.
- GPC uses and disclose PHI as permitted or required by the HIPAA Privacy Rule, Oregon State Law, or other laws.
- When permitted, GPC makes a reasonable effort to limit disclosure of PHI to the minimum necessary to accomplish the intended purpose of the disclosure.

### II. Uses and Disclosures Requiring Your Consent:

- GPC may use or disclose your PHI for treatment, payment, and health care operations purposes by obtaining your consent (given by signing the GPC Informed Consent for Treatment form).
- The exception to this is that GPC may disclose PHI to your health insurer if your insurance policy provides that, by accepting the benefits of the policy, subscribers/enrollees are deemed to have consented to the examination of their medical records for purposes of utilization review, quality assurance, and peer review by the insurer or its designee. However, GPC may not disclose Psychotherapy Notes to the insurer without a Privacy Rule Authorization.

### III. Uses and Disclosures Requiring a Privacy Rule Authorization:

- For uses and disclosures other than treatment, payment, or health care operations (e.g., to your employer, attorney, or school), GPC must obtain a client authorization.
- Any use or disclosure of Psychotherapy Notes requires an authorization meeting both Privacy Rule and Oregon State Law requirements.
- A client may revoke the authorization at any time unless action has been taken in reliance on the authorization.

# IV. Uses and Disclosures with neither Consent nor Authorization:

GPC may be required to disclose PHI without your consent or authorization in the circumstances described below. When possible, GPC will inform you before such disclosure.

- Child Abuse: If your records are requested in relation to a child abuse investigation, GPC is required to release them to the appropriate authorities. If we receive information about child abuse, GPC is required to make an oral report to the Department of Health and Human Services.
- Adult Abuse: If your records are requested in relation to an investigation of abuse
  of a vulnerable adult such as an elderly or disabled individual, GPC is required to
  release them to the appropriate authorities. If GPC receives information about
  abuse to a vulnerable adult, we are required to make an oral report to the
  Department of Health and Human Services.
- Government Oversight: In some circumstances, GPC may be required to disclose information to a public health authority, coroner or medical examiner, an agency for the military, national security, Veterans Affairs, or a law enforcement official.
- Judicial or Administrative Proceedings: If you are involved in court proceedings and a request is made for information about your evaluation, diagnosis, or treatment, and the records thereof, such information is privileged under state law and must not be released without your written authorization or a court order. This privilege does not apply if you are being evaluated for a third party or if the evaluation is court-ordered.
- Serious Threat to Health or Safety: GPC may disclose confidential information when we judge that such disclosure is necessary to protect against a clear and substantial risk of imminent serious harm by you to yourself or another person. GPC shall limit the disclosure of the otherwise confidential information to only those persons and only that content which would be consistent with the standards of the profession when addressing these problems. GPC may also use or disclose PHI that we have previously agreed to restrict if the restricted PHI is needed to provide you with emergency treatment.
- Worker's Compensation or Disability: If you file a Worker's Compensation or Disability claim, this constitutes authorization for GPC to release your relevant mental health records to involved parties and officials. This would include a past history of complaints or treatment of a similar condition.

#### V. Patients' Rights

Below is an outline of your rights regarding privacy of PHI and Psychotherapy Notes.

- Right to Request Restrictions: You have the right to request restrictions on the uses or disclosures of your PHI. To carry out treatment, payment, or health care operations, GPC is not required to accept the requested restrictions, and may terminate our agreement to not disclose at a later time.
- Right to Receive Confidential Communications by Alternative Means and at Alternative Locations: You have the right to request and to receive confidential communications from GPC of PHI by alternative means and at alternative locations. (For example, you may not want a family member to know you are participating in services at GPC; upon your request, we will send your bills to another address.)

- Right to Inspect and Copy: You have the right to inspect and/or obtain a copy of
  your psychotherapy notes in our records for as long as the PHI is maintained in the
  record. We may deny your request to access your Psychotherapy Notes under
  certain circumstances. In those cases, you may have this decision reviewed by GPC
  Director or another licensed mental health provider. Upon your request, we will
  discuss the details of the request, denial, and review process.
- Right to Amend: You have the right to request an amendment of your PHI for as long as the PHI is maintained in the record. If we accept the request, GPC is required to amend the PHI or record as agreed and to make a reasonable effort to inform and to provide the amendment to (1) persons identified by you as having received the PHI and who need the amendment, and (2) persons who have received the PHI that is the subject of the amendment and who may have relied or who could foreseeably rely on such information to your detriment.
- Right to an Accounting: You have the right to receive an accounting of GPC disclosures of your PHI made in the six years prior to your request. Exceptions include disclosures to carry out treatment, payment, and health care operations; to you or PHI about you; to correctional institutions or law enforcement officials; to government officials regarding national security or intelligence; or if it would impede the activities of a health oversight or law enforcement official.
- Right to a Paper Copy: You have the right to obtain a copy of this notice.

## VI. Administrative Issues: Safeguards and Complaints:

- GPC has in place appropriate administrative, technical, and physical safeguards in accordance with HIPAA.
- GPC meets the documentation requirements of the HIPAA Privacy Rule and the HIPAA Security Rule.
- GPC may periodically need to enter into business agreements with those providing support services for our operations on our behalf. In such cases, written agreements will be established so that they will safeguard the privacy of the PHI of our clients in accordance with this notice. We will rely on these business associates to abide by the contract and will take reasonable steps to remedy any breaches of which we become aware.
- The privacy of our client's PHI is critically important for our relationship with you and for the trustworthiness of GPC. As such, we provide a process for our clients to make complaints concerning our adherence to the requirements of HIPAA.
- GPC will not intimidate, coerce, discriminate against, or take retaliatory action against any client for exercising their rights under the HIPAA Privacy Rule or for filing a complaint.
- GPC will not require clients to waive their rights provided by the HIPAA Privacy Rule or right to file a Department of Health and Human Services compliance complaint as a condition of receiving treatment.

### VII. Our Responsibilities:

• We are required by law to maintain the privacy and security of your protected health information.

- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

For more information see: <a href="https://www.hhs.gov/hipaa/for-individuals/guidance-materials-forconsumers/index.html">https://www.hhs.gov/hipaa/for-individuals/guidance-materials-forconsumers/index.html</a>

# Changes to the Terms of this Notice

• We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, in our office, and on our web site.