

## **YOUR RIGHT TO ACCESS & CONTROL YOUR PROTECTED HEALTH INFORMATION**

You have the following rights regarding your protected health information (PHI), provided that you make a written request.

- **RIGHT TO REQUEST RESTRICTION.** You may request limitations on your mental health information we may disclose. We are not required to agree to your request but if we do we have to abide by the restriction. **RIGHT TO CONFIDENTIAL COMMUNICATIONS.** You may request communications in a certain way or at a certain location, but you must specify how or where you wish to be contacted.
- **RIGHT TO INSPECT AND COPY.** You have the right to inspect and copy your mental health record with the exception of psychotherapy notes, or information compiled for us in a civil, criminal, or administrative action or proceeding. We may charge a fee for copying, mailing, and supplies. Your right to inspect may be temporarily denied if it is deemed that the information within the record may be damaging to your mental health at the current time or refers to another person. You have the right to have this decision reviewed.
- **RIGHT TO REQUEST CLARIFICATION OF THE RECORD.** If you believe that the PHI we have about you is inaccurate you may ask to add clarifying information. We are not required to accept the information you propose.
- **RIGHT TO ACCOUNTING OF DISCLOSURES.** You may request a list of the disclosures of your mental health information that have been made to entities other than routine treatment, payment, or health care operations for the six years prior to the request, beginning with disclosures made after April 14<sup>th</sup>, 2003. We are not required, however to record disclosures we make pursuant to a signed consent/authorization or in the normal course of health care operations.
- **A RIGHT TO A COPY OF THIS NOTICE.** You may request a paper copy of the full notice at any time.

## **Concerns & Complaints**

If you have a question about this Notice, or you wish to exercise your rights described in this Notice, or you believe your privacy rights have been violated, please contact HND's Privacy Officer:

**Gail Hallmon**  
**The House Next Door**  
**804 N. Woodland Blvd**  
**DeLand, FL 32720**

**Phone: (386) 734-7571**

**Hours of Operation:**  
**8:30am – 5:00pm**

All complaints must be submitted in writing. You will not be penalized for filing a complaint.

A complaint may also be filed with the U.S. Department of Health and Human Services:

**Office for Civil Rights**  
**U.S. Department of Health**  
**and Human Services**  
**200 Independence Avenue, S.W.**  
**Room 509F, HHH Building**  
**Washington, D.C. 20201**

**OCR Hotline:**  
**1-800-368-1019**

This notice of Privacy Practice is effective  
August 1, 2003.

The House Next Door will abide by the terms of this Notice, however we reserve the right to change the terms of this Notice and to make any new provisions effective for all PHI that we maintain. Clients will be provided with a copy of any revised Notices upon request. An individual may obtain a copy of our current Notice at any time.



## **Notice of Privacy Practices Protected Health Information (PHI)**

**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**

### **Our Pledge Regarding Your PHI:**

The House Next Door (HND) creates a record of the care and services you receive from HND. We need this information to provide you with quality care, administer your health care benefits, and comply with certain legal requirements. This notice applies to all of the records containing protected health information (PHI) generated by HND.

We understand that information about you and your counseling care is personal and we are committed to protecting it. The House Next Door (HND) will take every reasonable action to protect your health care information and limit access to your information to the minimum amount reasonably necessary to accomplish the purpose of the disclosure.

## **SUMMARY OF NOTICE**

This notice describes how federal and state law allows medical information to be used and disclosed and how you can get access to this information.

Federal law, commonly called HIPAA, requires that we describe for you our privacy practices and your rights as a client under the law.

First, we use the information when we provide service for you or refer you for services. We may communicate with other professionals and referral agencies.

*For example:* The House Next Door may report back to a referring source your participation and completion of service.

Second, we may use the information to submit bills for your services to insurers, Medicaid, or third party payers.

*For example:* The House Next Door will submit claims to your insurance company on your behalf. This claim will provide your name, address, diagnosis and services provided to you.

Finally, we may use this information for our health care operations. We may use or disclose, as-needed, your information in order to support HND's business activities. Healthcare operations may include, but are not limited to, conducting quality assessment and improvement activities, employee review & supervision activities, oversight activities by public agencies or their designees, or record audits by licensing and accreditation bodies.

*For example:* The House Next Door is licensed by the State of Florida and is required to submit to an annual monitoring which includes random reviews of client files for compliance with best practices and accurate documentation.

## **WE MAY USE PHI WITHOUT YOUR PERMISSION FOR THE FOLLOWING REASONS:**

- To report suspected child abuse and neglect or if you are a danger to your self or others as required by law.
- To treat you in an emergency.
- To other practitioners and providers involved in treating you.
- In response to a subpoena, with proper notice to you, or a court order.
- When ordered by a regulatory agency, such as Health and Human Services.
- To law enforcement officers when the disclosures are directly related to a client's commission of a crime on the premises or a threat to commit a crime and are limited to the circumstances of the incident.
- To other agency staff if such staff needs to know the information to carry out duties related to the service.
- For statistical and research purposes when de-identified.
- For lawsuits and disputes
- To communicate with coroners, medical examiners, and funeral homes when necessary.
- To communicate with federal officials involved in security activities authorized by the law.
- To carry out treatment and billing operations through a billing or transcription service.

The House Next Door will not make any other use or disclosure of your PHI without your written authorization. You may revoke such authorization at any time, except in the extent that HND has taken action in reliance thereon. Any revocation must be in writing.

## **THE FOLLOWING PHI RECEIVES SPECIAL PROTECTIONS UNDER FEDERAL AND/OR STATE LAW:**

Information that may be released from the client file includes medication prescription and monitoring, counseling session start and stop times, the modalities and frequencies of treatment furnished, results of clinical tests and any *summary* of the following items: diagnosis, functional status, treatment plan, symptoms, prognosis, and progress to date.

Your therapist may keep Psychotherapy Notes that are kept separate from the client record and if so, those notes receive special protection.

Psychotherapy Notes are solely for the use of the practitioner and are not included in the client file. As such they are not used for any health care operations and are not subject to Court Orders.

The disclosure of Psychotherapy Notes is legally limited to:

1. Use by the originator of the notes for treatment.
2. Use or disclosure for the agency's in-house training programs for professionals.
3. Use or disclosure by the practitioner to defend themselves in a legal action or other disciplinary proceedings.

If you have any concerns about what information may be released, please discuss them with your therapist.