



JOINT NOTICE OF PRIVACY PRACTICES

Effective April, 2015

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

Section 1 – Your Rights

When it comes to your health information, you have certain rights. This section explains your rights and some of our responsibilities to help you.

You have a right to:

Get an electronic or paper copy of your medical record

- You can ask to see or get an electronic or paper copy of your medical record and other health information we have about you. Ask us how to do this.
- We will provide a copy or a summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee.
- Consistent with Montana law, access to your record may be denied in some circumstances. For example, access may be denied if your health care provider reasonably concludes that knowledge the health care information would be injurious to your health or could reasonably be expected to cause danger to the life or safety of any individual.

Ask us to correct your medical record

- You can ask us to correct health information about you that you think is incorrect or incomplete. Ask us how to do this.
- We may say “no” to your request, but we’ll tell you why in writing within 60 days.

Request confidential communications

- You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address.
- We will say “yes” to all reasonable requests.

Ask us to limit what we use or share

- You can ask us not to use or share certain health information for treatment, payment, or our operations. We are not required to agree to your request, and we may say “no” if it would affect your care.
- If you pay for a service or health care item out-of-pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer. We will say “yes” unless a law requires us to share that information.

Get a list of those with whom we’ve shared information

- You can ask for a list (accounting) of the times we’ve shared your health information for six years prior to the date you ask, who we shared it with, and why.
- We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We’ll provide one accounting a year for free but will charge a reasonable, cost-based fee if you ask for another one within 12 months.

Get a copy of this privacy notice

- You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.

Choose someone to act for you

- If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information.
- We will make sure the person has this authority and can act for you before we take any action.

File a complaint if you feel your rights are violated

- You can complain if you feel we have violated your rights by contacting us using the information on page 1.
- You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting www.hhs.gov/ocr/privacy/hipaa/complaints/.
- We will not retaliate against you for filing a complaint.

Section 2 – Your Choices

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

In these cases, you have both the right and choice to tell us to:

- Share information with your family, close friends, or others involved in your care
- Share information in a disaster relief situation
- Include your information in a hospital directory

If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.

In these cases we never share your information unless you give us written permission:

- Marketing purposes
- Sale of your information
- Most sharing of psychotherapy notes

In the case of fundraising:

- We may contact you for fundraising efforts, but you can tell us not to contact you again.

Section 3 – Our Uses and Disclosures

How do we typically use or share your health information?

We typically use or share your health information in the following ways.

1. Treat you

We can use your health information and share it with other professionals who are treating you.

Example: A counselor treating you asks another counselor about your overall health condition.

2. Run our organization

We can use and share your health information to run our practice, improve your care, and contact you when necessary.

Example: We use health information about you to manage your treatment and services.

3. Bill for your services

We can use and share your health information to bill and get payment from health plans or other entities.

Example: We give information about you to your health insurance plan so it will pay for your services.

How else can we use or share your health information?

We are allowed or required to share your information in other ways – usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html.

Help with public health and safety issues

We can share health information about you for certain situations such as:

- Preventing disease
- Helping with product recalls
- Reporting adverse reactions to medications
- Reporting suspected abuse, neglect, or domestic violence
- Preventing or reducing a serious threat to anyone's health or safety

Do research

We can use or share your information for health research.

Comply with the law

We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we are complying with federal privacy law.

Respond to organ and tissue donation requests

We can share health information about you with organ procurement organizations.

Work with a medical examiner or funeral director

We can share health information with a coroner, medical examiner, or funeral director when an individual dies.

Address workers' compensation, law enforcement, and other government requests

We can use or share health information about you:

- For workers' compensation claims
- For law enforcement purposes or with a law enforcement official
- With health oversight agencies for activities authorized by law
- For special government functions such as military, national security, and presidential protective services

Respond to lawsuits and legal actions

We can share health information about you in response to a court or administrative order, or in response to a subpoena.

Section 4 – 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:

www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html.

Section 5 – Special Rules Applicable to Psychotherapy Notes

Your mental health information is stored in two places. You will have a **Mental Health File**, which includes information stored by a mental health provider documenting treatment plan, dates of service, contacts, disclosures, progress and billing information for treatment purposes. Envision Counseling and Consulting contracts with the Therapy Notes company to keep digital mental health files. Therapy Notes is a SAS 70 Type II Certified Data Center that is HIPAA-Compliant.

Counselors at Envision Counseling and Consulting will also keep personal **Psychotherapy Notes**. Personal notes are kept in locked paper files.

What are Psychotherapy Notes?

Federal law defines “psychotherapy notes” as “notes recorded (in any medium) by a health care provider who is a mental health professional documenting or analyzing the contents of conversation during a private counseling session or a group, joint, or family counseling session and that are separated from the rest of the individual's medical record. Psychotherapy notes excludes 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, the treatment plan, symptoms, prognosis, and progress to date.” These notes are stored separately from the rest of your Mental Health File.

Psychotherapy notes are treated differently from other mental health information both because they contain particularly sensitive information and because they are the personal notes of the therapist that typically are not required or useful for treatment, payment, or health care operations purposes, other than by the mental health professional who created the notes.

When are Psychotherapy Notes Used or Disclosed?

Generally, any use or disclosure of psychotherapy notes requires your specific authorization. These notes may be used without authorization only by the mental health professional who created the notes for purposes of your treatment, or for other disclosures required by other law, such as for mandatory reporting of abuse and mandatory “duty to warn” situations regarding threats of serious and imminent harm made by the patient.

May I Obtain a Copy of My Psychotherapy Notes?

Generally no. While you have a right to access your personal health information, as described above, you do not have an unqualified right to access psychotherapy notes. Psychotherapy notes

are primarily for personal use by the treating professional and generally are not disclosed for other purposes.

Section 6 – Other Important Information

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.

This Notice of Privacy Practices applies to all of the Employees, Licensed Clinical Professional Counselors and Licensed Clinical Social Workers of Envision Counseling and Consulting.

These providers have agreed to this Joint Notice of Privacy Practices. These providers work together to provide care to patients. Health information may be shared between these providers consistent with the terms of this Joint Notice of Privacy Practices.

This Notice of Privacy Practice also applies to any masters-level interns or residents, who may access patient files in their capacity as workforce members of Envision Counseling and Consulting. Training of interns and residents is part of healthcare operations.

These providers contract outside of this organization with other people and entities to perform billing services. Information regarding sessions attended, diagnosis, fees, your identity, billing address and other pertinent information will be shared with the contracted billing agents for billing purposes only. The contracted billing agents are under Business Associates Agreements with Envision Counseling and Consulting and have agreed to protect your private health information consistent with Federal law and this Notice. Detailed clinical information will not be shared. Billing information may be sent via fax to insurance companies and to contracted billing associates. The utmost care and consideration will be taken to ensure that your billing information will be sent only to those applicable persons via electronic means.

Privacy Official

The Privacy Official listed below may be contacted with questions or concerns regarding this Joint Notice of Privacy Practices.

Privacy Official: Christine McCabe
Contact: (406) 522-0410

NOTICE OF PRIVACY PRACTICES
FOR PROTECTED HEALTH INFORMATION

A copy of this notice is available to me upon request. I know that I can contact the Privacy Official, Christine McCabe at 406-522-0410 x2 if I have further concerns.

Signature

Date