**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 IT CAREFULLY.***

Privacy is a very important concern for all those who use the services of our services. It is also complicated because of the many federal and state laws and our professional ethics. Please read through them carefully. If you have any questions I will be happy to help you understand our procedures and your rights.

 **A. Introduction – To our Clients**

This Notice will tell you how we handle your medical information. It tells how we use this information in our office, how we share it with other professionals and organizations, and how you can see it. If you have any questions or want to know more about anything in this Notice, please ask for more explanations or more details.

**Authorization of Exchange of Information**

For most disclosures of your health information we are required by State of Minnesota Laws to obtain a written consent from you, unless the disclosure is authorized by Law. This consent may be obtained at the beginning of your treatment, during the first delivery of health care service, or at a later point in your care, when the need arises to disclose your health information to others outside of our organization.

**B. What we mean by your medical information**

Each time you visit us or any doctor’s office, hospital, clinic or any other what are called “healthcare providers”, information is collected about you and your physical and mental health. It may be information about your past, present or future health or conditions, or the tests and treatment you got from us or from others, or about payment for healthcare. The information we collect from you is called, in the law, **PHI** which stands for **Protected Health Information**. This information goes into your medical or healthcare record or file, at the office.

In this office this PHI is likely to include these kinds of information:

* Your history. As a child, in school and at work, marriage and personal history.
* Reasons you came for treatment. Your problems, complaints, symptoms, or needs.
* Diagnoses. Diagnoses are the medical terms for your problems or symptoms.
* A treatment plan.
* Progress notes. Each time you come in we write down some things about how you are doing, what we notice about you, and what you tell us.
* Records we get from others who treated you or evaluated you.
* Psychological test scores, school records, and other reports.
* Information about medications you took or are taking.
* Billing and insurance information.

This is just to give you an idea and there may be other kinds of information.

We use this information for many purposes. For example, we may use it:

* To plan your care and treatment.
* To decide how well our treatments are working for you.
* When we talk with other healthcare professionals who are also treating you such as your family doctor or the professional who referred you to us.
* To show that you actually received the services from us which we billed to you or to your health insurance company.
* For public health officials trying to improve health care in this area of the country.
* To improve the way we do our job by measuring the results of our work.

When you understand what is in your record and what it is used for you can make better decisions about who should have this information and when and why they should have this information.

Although your health record is the physical property of the healthcare practitioner or facility that collected it, the information belongs to you. You can read it and if you want a copy we can make one for you (but we may charge you for the costs of copying and mailing, if you want it mailed to you). In some rare situations you cannot see all of what is in your records. If you find anything in your records that you think is incorrect or believe that something important is missing you can ask us to amend (add information to) your record although in some rare situations we don’t have to agree to do that.

**C. Privacy and the laws**

We are also required to tell you about privacy because of the privacy regulations of a federal law, the Health Insurance Portability and Accountability Act of 1996 (HIPAA). The HIPAA law requires us to keep your Personal Healthcare Information (or PHI) private and to give you this notice of our legal duties and our privacy practices which is called the **Notice of Privacy Practices** (or **NPP**). We will obey the rules of this notice as long as it is in effect but if we change it, the rules of the new NPP will apply to the entire PHI record we keep. If we change the NPP we will post the new Notice in our office where everyone can see. You or anyone else can also get a copy from our Privacy Officer at any time.

**D. How your protected health information can be used and shared**

When your information is read by me or others in the office, it is called, in the law, “**use**”. If the information is shared with or sent to others outside this office, that is called, in the law, “**disclosure**”. Except in some special circumstances, when we use your PHI here or disclose it to others we share only the minimum necessary PHI need for those other people to do their jobs. The law gives you rights to know about your PHI, how it is used and to have a say in how it is disclosed (shared) and so we will tell you more about what we do with your information.

We use and disclose PHI for several reasons. Mainly, we will use and disclose it for routine purposes and we will explain more about these below. For other uses we must tell you about them and have a written authorization form unless the law lets or requires us to make the disclosure without your authorization. However, the law also says that there are some uses and disclosures that don’t need your consent or authorization.

**1.** **Uses and disclosures of PHI in healthcare**

**1a.** **For treatment, payment, or health care operations.**

When you are referred to our agency, several people in our office may collect information about you and all of it may go into your healthcare records at the office. Generally, we may use or disclose your PHI for three purposes: treatment, obtaining payment, and what are called healthcare operations. Let’s see what these mean.

*For Treatment*

We use your medical information to provide you with psychological treatments or services. These might include individual, family, or group therapy, psychological, educational, or vocational testing, treatment planning, or measuring the benefits of our services.

We may share or disclose your PHI to others who provide treatment to you. We are likely to share your information with your personal physician. If you are being treated by a team they can share some of your PHI with them so that the services you receive will work together. The other professionals treating you will also enter their findings, the actions they took, and their plans into your medical record and so we all can decide what treatments work best for you and make up a Treatment Plan. We may refer you to other professionals or consultants for services we cannot provide. When we do this we need to tell them some things about you and your conditions. We will get back their findings and opinions and those will go into your records here. If you receive treatment in the future from other professionals we can also share your PHI with them. These are some examples so that you can see how we use and disclose your PHI for treatment.

*For Payment*

We may use your information to bill you, your insurance, or others so we can be paid for the treatments we provide to you. We may contact your insurance company to check on exactly what your insurance covers. We may have to tell them about your diagnoses, what treatments you have received, and the changes we expect in your conditions. We will need to tell them about when we met, your progress, and other similar things.

*For health care operations*

There are a few other ways we may use or disclose your PHI for what are called health care operations. For example, we may use your PHI to see where we can make improvements in the care and services we provide. Members of our staff may use information in your health record to assess the care and outcomes in your case and others like it. This information will then be used in an effort to continually improve the quality and effectiveness of the healthcare and service we provide. We may also be required to supply some information to some government health agencies so they can study disorders and treatment and make plans for services that are needed. If we do, your name and personal information will be removed from what we send.

**1b. Other uses in healthcare**

*Appointment Reminders*

We may use and disclose medical information to reschedule or remind you of appointments for treatment or other care. If you want us to call or write to you only at your home or your work or prefer some other way to reach you, we usually can arrange that. It is also important to clarify whether you feel comfortable with the use of texting and email as a means of communication about appointments. Just tell us.

*Treatment Alternatives*

We may use and disclose your PHI to tell you about or recommend possible treatments or alternatives that may be of help to you.

*Other Benefits and Services*

We use and disclose your PHI to tell you about health-related benefits or services that may be of interest to you.

*Research*

We may use or share your information to do research to improve treatments. For example, comparing two treatments for the same disorder to see which works better or faster or which costs less. In all cases your name, address and other personal information will be removed from the information given to researchers. If they need to know who you are we will discuss the research project with you and you will have to sign a special Authorization Form before any information is shared.

*Business Associates*

There are some jobs we may hire other businesses to do for us. In the law, they are called our Business Associates. Examples may include a copy service we may use to make copies of your health records and a billing service that figures out, prints and mails our bills. These business associates need to receive some of your PHI to do their jobs properly. To protect your privacy they would have to agree in their contract with us to safeguard your information.

**2.** **Uses and disclosures that require your *Authorization***

If we want to use your information for any purpose besides the TPO or those we described above we need your permission on an Authorization form. We don’t expect to need this very often.

If you do authorize us to use or disclose you PHI, you can revoke (cancel) that permission, in writing, at any time. After that time we will not use or disclose your information for the purposes that we agreed to. Of course, we cannot take back any information we had already disclosed with your permission or that we had used in our office.

**3.** **Uses and disclosures of PHI from mental health records that don’t require a**

 **Consent of Authorization.**

The law lets us use and disclose some of your PHI without your consent or authorization in some cases.Here are examples of when we might have to share your information.

**When required by law**

There are some federal, state, or local laws which require us to disclose PHI.

* We have to report suspected child abuse
* If you are involved in a lawsuit or legal proceeding and we receive a subpoena, discovery request, or other lawful process we may have to release some of your PHI. We will only do so after trying to tell you about the request, consulting your lawyer, or trying to get a court order to protect the information they requested.
* We have to disclose some information to the government agencies which check on us to see that we are obeying the privacy laws.

**For Law Enforcement Purposes**

We may release medical information if asked to do so by a law enforcement official to investigate a crime or criminal.

**For public health activities**

We might disclose some of your PHI to agencies which investigate diseases or injuries.

**Relating to decedents**

We might disclose PHI to coroners, medical examiners or funeral directors, and to organizations relating to organ, eye, or tissue donations or transplants.

**For specific government functions**

We may disclose PHI of military personnel and veterans to government benefit programs relating to eligibility and enrollment. We may disclose your PHI to Workers Compensation and Disability programs, to correctional facilities if you are an inmate, and for national security reasons.

**To Prevent a Serious Threat to Health or Safety**

If we come to believe that there is a serious threat to your health or safety or that of another person or the public we can disclose some of your PHI. We will only do this to persons who can prevent the danger.

**4. Uses and disclosures where you have an opportunity to object**

We can share some information about you with your family or close others. We will only share information with those involved in your care and anyone else you choose such as close friends or clergy. We will ask you about who you want us to tell what information about your condition or treatment. You can tell us what you want and we will honor your wishes as long as it is not against the law.

If it is an emergency – so we cannot ask if you disagree – we can share information if we believe that it is what you would have wanted and if we believe it will help you if we do share it. If we do share information, in an emergency, we will tell you as soon as we can. If you don’t approve we will stop, as long as it is not against the law.

**5. An accounting of disclosures**

When we disclose your PHI we may keep some records of whom we sent it to, when we sent it, and what we sent. You can get an accounting (a list) of many of these disclosures.

**E. If you have questions or problems**

If you need more information or have questions about the privacy practices described above please speak to the Privacy Officer whose name and telephone number are listed below. If you have a problem with how your PHI has been handled or if you believe your privacy rights have been violated, contact the Privacy Officer. You have the right to file a complaint with us and the Secretary of the Federal Department of Health and Human Services. We promise that we will not in any way limit your care here or take any actions against you if you complain.

If you have any questions regarding this Notice or our health information privacy policies, please contact Kris Aydt at 952-241-3171.

The effective date of this notice is April 14, 2003.