

6155 Oak Street, Suite E
Kansas City, Mo 64113
Phone: (816) 333-0606
Fax: (816) 523-5418
E-mail: bhp@behavioralhealthpartners.net



Notice of Privacy Practices for Behavioral Health Partners

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

This page provides a brief summary of your privacy rights. A full description of your rights is available in the following pages. If you need more information, please contact Elisabeth Chipps at (816) 333-0606.

Our Commitment to Your Privacy

Our practice is dedicated to maintaining the privacy of your personal health information. Behavioral Health Partners is required by law to keep health information about you private, to give you this Notice about our privacy practices and to follow the practices outlined in this Notice.

How I May Use and Disclose Your Health Information

Behavioral Health Partners will use your health information mainly to provide you with treatment (such as sending information about you to your referring physician), to arrange for payment (such as sending a bill to you or your insurance company), and for health care operations (such as making improvements in the care and services provided to you.) After you have read this Notice, we will ask you to sign a Consent Form to let us use and share your information. If you do not consent and sign this form, services cannot be provided to you. If you or we want to use or disclose your health information for any other purposes, your therapist will discuss this with you and ask you to sign an Authorization to allow for the release of this information.

Under certain circumstances, your therapist is allowed to use or disclose your health information without your written permission. Although these situations don't happen very often, the laws require Behavioral Health Partners to use and share your information when there is a serious threat to your health and safety or the health and safety of another person or public; when requested by law enforcement or in response to judicial orders; for Workers Compensation or other similar benefit programs; for public health purposes; reports of abuse, neglect or domestic violence or in emergency situations.

Your Rights Concerning Your Health Information

You can ask your Behavioral Health Partners therapist to communicate with you about your health and related issues in a particular way or at a certain place. For example, you can ask your therapist to contact you at home to schedule or cancel an appointment. Your therapist will do his/her best to do as you ask.

You have the right to ask your therapist to limit what he/she tells certain individuals involved in your care or the payment for your care, such as family members and friends. While your therapist does not have to agree to your request, if he/she does agree, your therapist will keep the agreement as long as it is not against the law, or in an emergency, or when the information is necessary for treatment.

You have the right to inspect and copy your health information Behavioral Health Partners has about you, unless your therapist believes that doing so would be emotionally damaging. There will be a fee for this service. You may ask your therapist to amend the health information you believe is incorrect or incomplete. All requests must be submitted to Behavioral Health Partners in writing indicating your reasons. You have the right to file a complaint if you believe that your privacy rights have been violated. You can file a complaint with Behavioral Health Partners and with the Secretary of the Department of Health and Human Services. All complaints must be in writing. Filing a complaint will not change the health care provided to you in any way.

You have the right to a copy of this Notice. Behavioral Health Partners reserves the right to make changes to this Notice. A copy of the current Notice will be posted in the waiting room and you can always get a copy from your therapist.

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

6155 Oak, Suite E
Kansas City, Missouri 64110
TELEPHONE: 816.333-0606
FAX: 816.523-5418

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Privacy is a very important concern for all those who come to this office. It is a complex matter because of federal, state laws, and my professional ethical code. This notice describes my privacy practices. I am committed to protecting your healthcare information. I am required by law to keep this information about you private, to give you this Notice about my privacy practices and to follow the practices outlined in this Notice. Because the rules are complicated, some parts of this Notice are quite detailed and you probably will have to read them several times. If you have any questions, I will be glad to help you.

Contents of This Notice

- A. Introduction – To My Clients**
- B. What your Health Care Information Means**
- C. Privacy and the Laws**
- D. How your Protected Health Information can be Used and Disclosed**
 - 1. Uses and Disclosures *With* your Consent**
 - a. The Basic Uses and Disclosures – For Treatment, Payment and Health Care Operations**
 - b. Other Uses and Disclosures in Health Care**
 - 2. Uses and Disclosures *Requiring* your Authorization**
 - 3. Uses and Disclosures *Not Requiring* your Consent or Authorization**
 - 4. Uses and Disclosures Allowing you to Have *An Opportunity to Object***
 - 5. An *Accounting* of Disclosures**
- E. If you Have Questions or Problems**

A. Introduction – To Our Clients

This notice will tell you how I handle information about you. It tells how I use this information here in this office, how I may share it with other professionals and organizations, and how you can see it. I want you to be informed so that you can make the best decisions for yourself and your family. I am required to inform you in agreement with the privacy regulations of a federal law, the Health Insurance Portability Act of 1996 (HIPAA).

B. What your Health Care Information Means

Each time you visit me or any doctor's office, hospital, clinic, or any other "health care provider," 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 about the treatment or other services you got from me or from others, or about payment for healthcare. The information I 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, the PHI is likely to include these kinds of information:

- Your history. As a child, in school and at work, and marital and personal history.
- Reasons you came for treatment. Your problems, concerns, symptoms, needs, goals.
- Diagnoses. Diagnoses are the medical terms for your problems or symptoms.

- A treatment plan. These are the treatments and other services or approaches which I think will best help you.
- Progress Notes. Each time you come in I write down some things about how you are doing, what I observe about you, and what you tell me.
- Records I get from others who treated or treat you.
- Psychological test scores, school records, etc.
- Information about medications you took or are taking.
- Legal matters.
- Billing and insurance information.

I use this information for different purposes. For example, BHP may use it:

- To plan your care and treatment.
- To decide how well my services are working for you.
- When I communicate with other healthcare professionals who are also treating you, such as your family doctor, psychiatrist, or the professional who referred you to me.
- To show that you actually received the services from me, which I billed to you or your insurance company.
- For teaching and training other health care professionals, taking every step to remove any and all identifying information in order to protect your confidentiality.
- For medical or psychological research, taking every step to remove any and all identifying information.
- For public health officials trying to improve health care in this country, taking every step to remove any and all identifying information.
- To improve the way I do my job by measuring the results of my work.

When you understand what is in your file and what it is used for, you can make better decisions about who, when, and why others 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 have the right to inspect, read, review or receive a copy of these records, unless I believe that doing so would be emotionally damaging or not in the best interest of the client. In this case I will be more than willing to send them to a mental health professional of your choice. In addition, test scores and other sensitive data can only be released to a professional qualified to interpret the material. Should you decide to review your records, I recommend that you review them in my presence so that we can discuss the contents. If you find anything in your records that you think is incorrect or something important is missing, you can ask me to amend your file, although in some rare situations, I don't have to agree to do that. Clients will be charged an appropriate fee for any time spent in preparing information requests.

C. Privacy and the Laws

The HIPAA law requires me to keep your PHI private and to give you this notice of my legal duties and my privacy practices, which is called the *Notice of Privacy Practices* or *NPP*. I will abide by the rules of this notice as long as it is in effect, and I will change my compliance as these rules are modified or changed. Should this happen, a new NPP will be posted in my office where you can see it. You can also get a copy of this NPP or any future ones, as applicable, at any time.

D. How Your Protected Health Information Can be Used and Shared

When your information is read by your BHP therapist that 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 I use your PHI in the office or disclose it to others, BHP shares only the **minimum necessary** PHI needed for the purpose. The law gives you rights to know about your PHI, how it is used and to have a say in how it is disclosed and so I will tell more about what I do with your information.

Your BHP therapist will use and disclose PHI for several purposes. Mainly, BHP will use and share it for routine purposes and we will explain more about these below. For other uses, BHP must tell you about them and have a written Authorization from you unless the law allows or requires me to make the use or disclosure without your authorization.

1. Uses and Disclosures *WITH* your Consent

Along with this Notice, BHP will ask you to sign a separate *Consent Form* to allow me to use and share your PHI. In almost all cases we intend to use or share your PHI to provide *treatment* to you, to arrange for *payment* of my services, for some other functions called *health care operations*, or for other purposes described below. The *Consent Form* allows me to use and disclose your PHI.

- **Treatment**

BHP uses your healthcare/medical information to provide you with psychological treatment or services. These might include individual therapy, couples therapy, family therapy, psychological, educational, or vocational testing, treatment planning, or measuring the outcome of my services.

BHP may share or disclose your PHI to others who also provide treatment to you. Your BHP therapist may share it with your Primary Care Physician or Psychiatrist. If you are being treated by a team, BHP can share some of your PHI with them, so that the services you receive will be coordinated. They will also enter their findings, the actions they took, and their plans into your record with them, and so we all can decide what treatments work best for you and make up a Treatment Plan. BHP may refer you to other professionals or consultants for services I cannot offer, such as special testing or treatments. When we do this, BHP needs to share some things about you and your complaints or condition. Your BHP therapist 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 our PHI with them. These are some examples, so that you can see how BHP may use and disclose your PHI for treatment.

- **For Payment**

BHP may use and disclose healthcare information about you to bill you, to bill your insurance company, or other parties who help pay for your care. For example, BHP may contact your insurance company to check on exactly what your insurance plan covers. Your BHP therapist may have to tell them about your diagnosis, what treatments you have received, and what to expect as the BHP therapist provides care for you. Your BHP therapist will need to tell them about when we meet your progress and other similar things.

- **For Health Care Operations**

BHP may use and disclose health care information about you for other health care operations. These uses and disclosures are necessary to ensure that all my clients receive quality care. For example, we may use your PHI to see where we can make improvements in the care and services we provide. Thus, we may seek consultation or supervision from other professionals. I 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. In any of these circumstances, your name and identity will be removed from my disclosures.

- **For Other Uses**

Appointment Reminders; BHP may contact you to remind you about your appointment or to reschedule.

Treatment Alternatives; Your BHP therapist may use and disclose your PHI to tell you about or recommend possible treatments or alternatives that may be of interest to you.

Other Benefits and Services; BHP may use and disclose your PHI to tell you about health-related benefits or service that may be of interest to you.

Business Associates; There are some jobs BHP hires other businesses to do for them. They are called our Business Associates in the law. Examples may include transcription services, collection agencies, and billing services. When hired, these business associates need to receive some of your PHI to do their job properly. To protect your privacy, they have agreed in their contract with me to safeguard your information.

Research; BHP may use or share your information to do research to improve treatments. For example, comparing two treatments for the same disorder to see which is most effective. In all cases, your name, address and other information that reveals who you are will be removed from the information given to researchers. If the researchers need to know who you are, your therapist will discuss the project with you and you will have to sign a special Authorization form before any information is shared.

2. Uses and Disclosures Requiring Your Authorization

If your therapist want to use your information for any purpose besides those described above, we need your permission on an Authorization Form. If you do authorize your BHP therapist to use or disclose your 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, your BHP therapist cannot take back any information already disclosed with your permission or that we had used in our office.

3. Uses and Disclosures NOT REQUIRING Your Consent or Authorization

The law allows BHP to use and disclose some of your PHI without your consent or authorization in some cases;

- **As Required by Law**

BHP will disclose information about you when required to do so by federal, state or local laws.

- **Lawsuits and Disputes**

If you are involved in a lawsuit or legal proceeding BHP may disclose information about you in response to a court or administrative order, subpoena, discovery request, or other lawful process. BHP will only do so after trying to assert, on your behalf, your right to privacy.

- **For Public Health Risks & Purposes**

As required by law, BHP may disclose PHI about you for public health activities. For example:

- To prevent or control disease, injury or disability
- To report births and deaths
- To report child or elderly abuse or neglect
- To report reactions to medications or problems with products
- To notify a person who may have been exposed to a disease or may be at risk for contracting or spreading a disease or condition, and
- To notify the appropriate government authority if we believe a client has been the victim of abuse, neglect or domestic violence. I will only make this disclosure subject to certain requirements when mandated or authorized by law.

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

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

- **For Specific Government Functions**

Your BHP therapist may disclose PHI of military personnel and veterans to government benefit programs relating to eligibility and enrollment, to Workers' Compensation programs, to correctional facilities if you are in inmate, and for national security reasons.

- **For Law Enforcement Functions**

BHP may release PHI if asked to do so by a law enforcement official for the reporting or certain types of wounds; in response to a court order, subpoena, warrant, summons or similar process; to identify or locate a

suspect, fugitive, material witness, or missing person; to report about a death your BHP therapist believes may be the result of criminal conduct; to investigate a crime or criminal; and in emergency situations to report a crime, the location of the crime or victims, or the identity, description or location of the person who committed the crime.

- **Relating to Deceased Persons**

Your BHP therapist may disclose PHI to a coroner or medical examiner or to funeral directors. This may be necessary, for example, to identify a deceased person or determine the cause of death.

4. Uses and Disclosures Allowing You to Have an Opportunity to Object

Your BHP therapist can share some information about you with your family or close others. BHP therapist 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 your BHP therapist to tell that information about your condition or treatment. You can choose who you want and we will honor your wishes as long as it is not against the law. If it is an emergency such that your therapist cannot ask if you disagree, we can share information if your BHP therapist believes that it is what you would have wanted and if I believe it will help you if I do share it. If your BHP therapist does share information, in an emergency, we will tell you as soon as we can. If you don't approve, your BHP therapist will stop, as long as it is not against the law.

5. Accounting of Disclosures

When we disclose your PHI BHP keeps 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 about, please speak to me, your Privacy Officer, to the telephone number 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 your Privacy Officer. You have the right to file a complaint with me and with the Secretary of the Federal Department of Health and Human Services. I promise that I 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 my health information privacy policies, please contact your Privacy Officer, Elisabeth Chipps at (816) 333-0606.

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