

# PRIVACY PRACTICES NOTICE

Effective April 14, 2003

The Notice of Privacy Practices describes how SARHC may use and disclose your Protected Health Information (PHI) to carry out treatment, payment and health care operations, and for other purposes that are permitted or required by law. It also describes your rights to privacy as a client of SARHC.

## UNDERSTANDING YOUR PROTECTED HEALTH INFORMATION (PHI)

Each time you receive services from SARHC a record of the service is made. Typically, this record will contain the following types of information: symptoms, test results, diagnoses, treatment plan, services received, medications, and progress toward treatment goals.

At SARHC, we refer to this information as your "clinical record" but this is also referred to as your 'Protected Health Information' (PHI).

SARHC reserves the right to change our privacy practices and to make new provisions effective for all protected health information created and maintained by this organization. Should our privacy practices change, we will mail a revised notice to the last known address in your official record. We will also post the revised notice in prominent public access locations throughout our facilities.

## HOW WE USE/DISCLOSURE YOUR PROTECTED HEALTH INFORMATION (PHI)

### TREATMENT

SARHC will use and disclose your protected health information to provide, coordinate and manage your treatment and any related services required for your mental and physical well-being. Examples may include:

- Communicating among members of your treatment team
- Planning your course of treatment and care
- Consultation with and/or referral to other health care providers

### PAYMENT

A bill for the services SARHC has provided will be created on a regular basis and sent to you or a third-party for payment. The bill may include PHI from your clinical record supporting the request for payment. Examples for payment include:

- A means by which you or a third party are billed for services provided.
- A legal document verifying that specific services were provided.

### HEALTH CARE OPERATIONS

PHI may be used as a tool by which SARHC can assess, plan and improve services, care and outcomes. Examples include but are not limited to:

- Quality assessment/improvement activities
- Staff competence reviews
- A source of data for facility and/or service planning.
- Compliance or financial audits
- Medical or legal reviews
- Business planning, management and administration

## OTHER PERMITTED AND REQUIRED USES AND DISCLOSURES

**SARHC may use or disclose your PHI in the following situations without your consent, authorization or opportunity to object. These situations include:**

**Business Associates:** SARHC may share your PHI with third party "business associates" that perform various functions (legal counsel, financial audits etc.) for the organization. Those who monitor, evaluate, certify, license, accredit or otherwise contract with us at times require access to PHI.

**Requirements By Law:** We may use or disclose your PHI to the extent that the law requires it as is the case in reporting suspected abuse or neglect.

**Public Health:** We may use or disclose your PHI to a public health authority that is permitted by law to receive the information for purposes of controlling disease, injury or disability.

**Health Oversight:** We may use or disclose your PHI to a health oversight agency for activities authorized by law, such as audits, investigations and inspections.

**Legal Proceedings:** We may use or disclose your PHI, in response to a court order or valid subpoena.

**Law Enforcement:** We may use or disclose your PHI for certain law enforcement purposes.

**Coroners and Medical Examiners:** We may use or disclose your PHI to a coroner or medical examiner for identification purposes or to assist in determining cause of death.

**Safety:** We may use or disclose your PHI if we believe that the use or disclosure will prevent or lessen a serious and imminent threat to the health and safety of an individual or the public.

**Workers' Compensation:** We may use or disclose your PHI to comply with laws relating to Workers' Compensation.

**Emergency Situations:** Our professionals are trained to identify and respond to emergency situations. When we conclude that an emergency exists, our focus is on immediate intervention and stabilization for the client, not on privacy. Consequently, we may use and disclose PHI as needed to provide the appropriate healthcare services, even when it conflicts with the client's normal privacy expectations.

**ALL OTHER USES AND DISCLOSURES WILL BE MADE ONLY WITH YOUR ADVANCE WRITTEN AUTHORIZATION.**

## **YOUR HEALTH INFORMATION RIGHTS:**

**You have the right to inspect and copy your protected health information (with the exception of psychotherapy notes).** Arkansas law asserts that, if the information could be detrimental to your mental or physical health, a licensed mental health professional may deny access completely or in part based on his/her professional judgment.

**You have the right to request a restriction on your PHI.** You may request that all or parts of your PHI not be disclosed to certain individuals. This would include family and friends who may be involved in your treatment. However, if your psychiatrist or other licensed mental health professional believes that use and disclosure are in your best interest, your PHI will not be restricted. If the requested restriction is granted, SARHC, will make no use or disclosure in violation of the restriction, unless it is needed to provide emergency treatment.

**You have the right to request an amendment to your PHI.** You may request to have your PHI amended. In certain cases, we may deny a request for an amendment. If a request is denied, you will be advised as to the reason(s) for the denial, and you will have the right to file a statement of disagreement with the SARHC Client Advocate.

**You have the right to receive an accounting of disclosures SARHC may have made of your PHI.** This right applies to disclosures for purposes other than treatment, payment and health care operations as described earlier in this document.

**You have the right to complain about our privacy practices.** You may contact the Director of Medical Records at (870) 862-7921 if you have questions about your privacy rights. If your questions cannot be resolved at this level, you may contact the Client Advocate at the same number. If your complaint cannot be resolved, you may appeal to the Chief Executive Officer or file your complaint with the Division of Behavioral Health Services at 305 S. Palm Little Rock, AR 72205. SARHC will not in any way retaliate against you for filing a complaint.

**You have the right to revoke or amend any consent, authorization or restriction of your PHI at any time.** You may contact the SARHC Director of Medical Records for information about this process.

## **OUR COMMITMENT TO PROTECT YOUR PHI:**

SARHC is required by law to do the following:

- Maintain policies and practices that protect the security and privacy of your protected health information.
- Secure your electronic medical record from premature destruction and unauthorized disclosure.
- Provide you with this notice of our legal duties and privacy practices with respect to information that we collect and maintain about you and the services you have received.
- Abide by the terms of this notice, until such time as our privacy practices or the law changes.
- Notify you if we are unable to agree to a restriction or amendment pertaining to your protected health information.
- Accommodate reasonable requests to communicate or provide your protected health information via alternative means.
- Provide examples of our practices to help you better understand how your protected health information will be used and disclosed.

### **MINIMUM NECESSARY RULE:**

Even though we can lawfully use and disclose your health information under a variety of circumstances, we always try to limit the information to the minimum necessary. This sometimes requires the exercise of professional judgment.

**If you have any questions about this acknowledgement, please contact: SARHC Director of Medical Records.**