

HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996 (HIPAA)

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. This document may be updated without notice so please review it each time you visit us. A copy of this statement is always available upon request.

All information revealed by you in a counseling/therapy session and most information placed in your counseling/therapy file (all medical records or other individually identifiable health information held or disclosed in any form {electronic, paper, or oral}) is considered "protected health information by HIPAA. As such, your protected health information cannot be distributed to anyone else without your expressed informed and voluntary written consent or authorization. The exceptions to this are defined immediately below. Additional information regarding your rights as a client can be found in your therapist's/counselor's Professional Disclosure Statement and Consent for Treatment.

Use or disclosure of the following protected health information does not require your consent or authorization:

1. Uses and disclosures required bylaw—as in files subpoenaed by a Judge
2. Uses and disclosures about victims of neglect, abuse, or domestic violence--as in the duty to warn explained in your therapist's/counselor's Disclosure Statement
3. Uses and disclosures for health and oversight activities—as in correcting records or correcting records already disclosed.
4. Uses and disclosure for judicial and administrative proceedings—as in a case where you are claiming malpractice or breach of ethics.
5. Uses and disclosures for law enforcement purposes—as in when you claim mental health issues as a defense in a civil or criminal case.
6. Uses and disclosures for research purposes—like using client information in research always maintaining confidentiality.
7. Uses and disclosures to avert a serious threat to health or safety—like calling Probate Court for a commitment hearing.
8. Uses and disclosures for Worker's compensation—like the basic information obtained in therapy/counseling as a result of your Worker's Compensation.

Your Rights as a Counseling/Therapy Client under HIPAA

1. As a client, you have the right to view and/or receive a copy of your counseling/therapy file. Psychotherapy notes are afforded special privacy protection under the HIPAA regulations and are excluded from this right.
2. As a client, you have the right to request amendments to your counseling/therapy file.
3. As a client, you have the right to receive a history of all disclosures of protected health information.
4. As a client, you have the right to restrict the use and disclosure of your protected health information for the purposes of treatment, payment, and operations. If you choose to release any protected health information, you will be required to sign a Release of Information form detailing exactly what information you wish disclosed and to whom it will be disclosed.
5. As a client, you have the right to register a complaint with the Secretary of Health and Human Services if you feel your rights herein explained have been violated.

Prior to your counseling or therapy, you will receive for your personal records:

1. an exact duplicate of this document
2. your counselor's Professional Disclosure Statement and Consent for Treatment document