

NOTICE OF PRIVACY PRACTICES

This notice describes how your health information is protected and confidential. It also describes those circumstances where it may be used and disclosed in counseling and how you can get access to this information if you wish to do so. Please review it carefully.

Except in the instances described in this Notice, the information you share with your counselor is confidential to this office only. It is our objective to follow, at all times, the Federal and State laws applicable to psychological and substance abuse services under HIPAA standards or the federal Health Insurance Portability and Accountability Act, 45 CFR Part 464 (HIPAA).

USE AND DISCLOSURE OF PROTECTED HEALTH INFORMATION WITH CONSENT OR AUTHORIZATION

We may use or disclose your protected health information (PHI) for treatment, payment and health care operation purposes **with your consent**.

- We may use or disclose PHI for purposes outside of treatment, payment, or health care operation when your appropriate authorization is obtained. Authorization” is written permission above and beyond the general consent that permits only specific disclosures.
- You may revoke all authorizations of PHI at any time, provided such revocation is in writing. You may not revoke an authorization to the extent that (1) we have relied on that authorization or (2) If the authorization was obtained as a condition of obtaining insurance coverage, law provides the insurer the right to contest the claim under the policy.

USES AND DISCLOSURES WITH NEITHER CONSENT NOR AUTHORIZATION

We may use or disclose PHI **without your consent** or authorization in the following circumstances. These are exceptions to and Limitations of Client Confidentiality:

- **Disclosures for threats to safety:** If you communicate to our agency an explicit threat of imminent serious physical harm or death to a clearly identified or identifiable victim(s) and we believe you have the intent and ability to carry out such a threat, we have a duty to take reasonable precautions to prevent the harm from occurring, including hospitalization procedures. We have a duty to warn others of a threat. If you believe there is an imminent risk that you will inflict serious harm on yourself, we may disclose information in order to protect you.
- **Child Abuse:** We are required to report PHI to the appropriate authorities when we have reasonable grounds to believe that a minor is or has been the victim of neglect or physical and/or sexual abuse. A report may be made to the appropriate government authorities without seeking authorization.
- **Adult and Domestic Abuse:** If we have the responsibility for the care of an incapacitated or vulnerable adult, we are required to disclose PHI when we have a reasonable basis to believe that occurred. We are required by law to report situations in which we believe elder abuse or neglect has occurred. This report may be made to the appropriate government authorities without seeking authorization.
- **Judicial and Administrative Proceedings, Court Orders, and Subpoenas:** If you are involved in a court proceeding and a request is made for information about the professional services we provided you and/or the records thereof, such information is

privileged under state law, and we will not release information without the written authorization of you or your legally appointed representative or a court order. The privilege does not apply when you are being evaluated for a third party or where the evaluation is court ordered. You will be informed in advance if this is the case. The mere issuance of a subpoena does not indicate that a privileged communication is now open for discussion. We must still assert the privilege until you waive it, or unless a judge orders the privilege to be waived.

- **Health Oversight Activities:** If the Arizona Board of Behavioral Health Examiners is conducting an investigation, then we are required to disclose PHI upon receipt of a subpoena from the Board.
- **Workers Compensation:** We may disclose PHI as authorized by and to the extent necessary to comply with laws relating to worker's compensation or other similar programs, established by law, that provide benefits for work-related injuries or illness without regard to fault.

We are required by law to make disclosures of your PHI upon your request and maintain the privacy of your PHI and provide you with notice of our legal duties and privacy practices with respect to your PHI. We reserve the right to change the privacy policies and practices described in this notice, unless we notify you of such changes, however, we are required to abide by the terms currently in effect. If we revise our policies and procedures, we will provide you a copy of any revised notice of Privacy Practices at your request.

This notice went into effect on December 9th, 2019.