

## **PRIVACY NOTICE**

### **Notice of the Counseling Center's Policies and Practices to Protect the Privacy of Your Health Information**

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

#### **I. Uses and Disclosures for Treatment and Health Care Operations**

The Counseling Center may *use* or *disclose* your *protected health information (PHI)*, for *treatment and health care operations* purposes with your consent. To help clarify these terms, here are some definitions:

- “*PHI*” refers to information in your health record that could identify you.
- “*Treatment and Health Care Operations*”
  - *Treatment* is when we provide, coordinate or manage your health care and other services related to your health care. An example of treatment would be when we consult with another health care provider, such as your family physician or another mental health professional.
  - *Health Care Operations* are activities that relate to the performance and operation of the Counseling Center. Examples of health care operations are quality assessment and improvement activities, business-related matters such as audits and administrative services, and case management and care coordination.
- “*Use*” applies only to activities within the Counseling Center, such as sharing, employing, applying, utilizing, examining, and analyzing information that identifies you.
- “*Disclosure*” applies to activities outside of the Counseling Center, such as releasing, transferring, or providing access to information about you to other parties.

#### **II. Uses and Disclosures Requiring Authorization**

The Counseling Center may use or disclose PHI for purposes outside of treatment or health care operations when your appropriate authorization is obtained. An “*authorization*” is written permission above and beyond the general consent that permits only specific disclosures. In those instances when we are asked for information for purposes outside of treatment and health care operations, the Counseling Center will obtain an authorization from you before releasing this information.

You may revoke an authorization at any time, provided it is in writing. You may not revoke an authorization to the extent that the Counseling Center has relied or already acted on that authorization.

The Counseling Center will also obtain an authorization from you before using or disclosing PHI in a way that is not described in this Notice.

### **III. Uses and Disclosures with Neither Consent nor Authorization**

The Counseling Center may use or disclose PHI without your consent or authorization in the following circumstances:

- *Child Abuse* – If we have reasonable cause to suspect that a child has been or may be subjected to abuse or neglect, or if we observe a child being subjected to conditions which would reasonably result in abuse or neglect, the Counseling Center must immediately report such information to the Missouri Division of Family Services. The Counseling Center must also report sexual abuse or molestation of a child under 18 years of age to Family Services. The Counseling Center may also report child abuse or neglect to a law enforcement agency or juvenile office.
- *Adult and Domestic Abuse* – If we have reasonable cause to suspect that an eligible adult (defined below) presents a likelihood of suffering physical harm or is in need of protective services, the Counseling Center must report such information to the Missouri Department of Social Services.

“*Eligible adult*” means any person 60 years of age or older, or an adult with a handicap (substantially limiting mental or physical impairment) between the ages of 18 and 59 who is unable to protect their own interests or adequately perform or obtain services which are necessary to meet their essential human needs.

- *Health Oversight Activities* – The Missouri Attorney General’s Office may subpoena records from the Counseling Center relevant to disciplinary proceedings and investigations conducted by the Missouri State Committee of Psychologists.
- *Judicial and Administrative Proceedings* – If you are involved in a court proceeding and a request is made for information about your diagnosis or treatment and the records thereof, such information is privileged under state law, and the Counseling Center will not release information without written authorization from you or your personal or 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. We will inform you in advance if this is the case.
- *Serious Threat to Health or Safety* – When we judge that disclosure is necessary to protect against a risk of serious harm being inflicted by you on yourself, another person, or to the University community, the Counseling Center must disclose your relevant confidential information to the appropriate professional workers, University authorities, public authorities, the potential victim, their family, your family, or whoever is needed to be involved in the situation.
- *Workers' Compensation* – If you file a worker’s compensation claim, the Counseling Center must permit your record to be copied by the Missouri Labor and Industrial Commission or the Division of Worker’s Compensation of the Missouri Department of Labor and Industrial Relations, your employer, you and any other party to the proceedings.

- *When the use and disclosure without your consent or authorization is allowed under other sections of Section 164.512 of the Privacy Rule and the state's confidentiality law - This includes certain narrowly-defined disclosures to law enforcement agencies, to a health oversight agency (such as HHS or a state department of health), to a coroner or medical examiner, for public health purposes relating to disease or FDA-regulated products, or for specialized government functions such as fitness for military duties, eligibility for VA benefits, and national security and intelligence.*

#### **IV. Your Rights and Clinician Duties**

##### Your Rights:

- *Right to Request Restrictions* – You have the right to request restrictions on certain uses and disclosures of protected health information. However, the Counseling Center is not required to agree to a restriction you request.
- *Right to Receive Confidential Communications by Alternative Means and at Alternative Locations* – You have the right to request and receive confidential communications of PHI by alternative means and at alternative locations.
- *Right to Inspect and Copy* – You have the right to inspect or obtain a copy (or both) of PHI in the Counseling Center mental health records used to make decisions about you for as long as the PHI is maintained in the record. The Counseling Center may deny your access to PHI under certain circumstances, but in some cases, you may have this decision reviewed. On your request, a clinician will discuss with you the details of the request and denial process.
- *Right to Amend* – You have the right to request an amendment of PHI for as long as the PHI is maintained in the record. The Counseling Center may deny your request. On your request, a clinician will discuss with you the details of the amendment process.
- *Right to an Accounting* – You generally have the right to receive an accounting of disclosures of PHI. On your request, a clinician will discuss with you the details of the accounting process.
- *Right to a Paper Copy* – You have the right to obtain a paper copy of this Privacy Notice from the Counseling Center upon request.
- *Right to Be Notified if There is a Breach of Your Unsecured PHI* - You have a right to be notified if: (a) there is a breach (a use or disclosure of your PHI in violation of the HIPAA Privacy Rule) involving your PHI; (b) that PHI has not been encrypted to government standards; and (c) our risk assessment fails to determine that there is a low probability that your PHI has been compromised.

### Clinician Duties:

- The Counseling Center is required by law to maintain the privacy of PHI and to provide you with a notice of our legal duties and privacy practices with respect to PHI.
- The Counseling Center reserves the right to change the privacy policies and practices described in this notice. Unless CC notifies you of such changes, however, the Counseling Center is required to abide by the terms currently in effect.
- If the Counseling Center revises our policies and procedures during the course of your treatment, we will make available to you a revised notice at your next appointment or as is feasible.

### **V. Complaints**

If you are concerned that the Counseling Center has violated your privacy rights, or you disagree with a decision the Counseling Center made about access to your records, you may contact Jeanne Woon, Ph.D., Assistant Director of the Counseling Center, at 660-543-4060.

You may also send a written complaint to the Secretary of the U.S. Department of Health and Human Services. The person listed above can provide you with the appropriate address upon request.

### **VI. Effective Date, Restrictions and Changes to Privacy Policy**

This notice will go into effect immediately.

The Counseling Center reserves the right to change the terms of this notice and to make the new notice provisions effective for all PHI that we maintain. If the Counseling Center revises this notice during the course of your treatment, we will make available to you a revised notice at your next appointment or as is feasible.