



## Notice of Privacy Policies

This notice describes how health-related information about you may be used and disclosed. It also describes how you can get access to this information. Please review it carefully.

### *Introduction*

At Shield Bearer Counseling Centers, we are dedicated to using and disclosing your protected health information in a responsible way. This notice applies to the medical, mental health, and, if applicable, drug and alcohol-related records that are generated by Shield Bearer Counseling Centers. The term "protected health information" refers to information you share with us or which arises while we are serving you. This Notice of Privacy Practices explains how we may use and disclose your protected health information and our legal duties to protect the privacy of health records that we create or receive. It also explains your rights as they relate to your protected health information.

This notice is effective August 1, 2011, and applies to all protected health information as defined by federal regulations.

### *Confidentiality and Privacy of Client Records*

The confidentiality and privacy of client records maintained by this program is in accordance with the ethical standards set by the Licensed Professional Counselor Board, the American Association of Marriage and Family Therapists Board, and laws governing the licensure of these bodies, where applicable. In addition, Shield Bearer Counseling Centers complies with federal regulations. These regulations include the Health Information Portability and Accountability Act (HIPAA) and Federal Confidentiality Regulations (42 CFR Part 2) governing federally assisted alcohol and substance abuse programs. Information revealed by an individual or individuals, or otherwise obtained by a Shield Bearer Counseling Centers member, will be kept confidential and private. Generally, the program may not say to a person outside the program that a client attends the program or disclose any information identifying a client as someone who has a substance problem. Please note the exceptions listed under "The Type of Use and Disclosures We May Make."

### *The Type of Uses and Disclosures We May Make*

Generally, your protected health information will be disclosed only if you sign a written authorization. Under certain circumstances, however, we may use and disclose your protected health information without your knowledge and as a part of our regular operations. The following gives you examples of the ways in which your protected health information may be used and disclosed. Not every possible use or disclosure is covered, but all of the ways we are allowed to use and disclose information fall into one of these categories:

- We will use your health information for your treatment at Shield Bearer Counseling Centers. For example: Information obtained by a Shield Bearer Counseling Centers staff involved in your health care will be recorded in your clinical record and used to determine the course of treatment that should work best for you. Information gathered may be used for creating an assessment, developing a treatment plan, recording your progress in treatment, and assisting in writing your after-care plan.
- We will use your health information for regular health care operations at Shield Bearer Counseling Centers. For example: We may use your health information for such quality improvement purposes as reviewing our treatment and evaluating the performance of our staff in caring for you. To help us assess the quality of our services, we may ask you to fill out client satisfaction surveys.
- We may disclose your health information to medical personnel in an emergency situation. For example: If you cannot make decisions because of a medical emergency, we may disclose your health information to medical personnel involved in your care. We will let you know that this information has been disclosed and will make every effort to obtain your written authorization as soon as the emergency situation has ended.
- We will disclose your health information to help prevent serious harm to you or others. For example: If you tell us, or give us reason to believe, that you have a clear plan to hurt a specific person or yourself, we will disclose your health information to help prevent serious harm. However, any such disclosure will be only to someone able to help prevent the threat of serious harm.
- We will disclose your health information to report incidents of suspected child abuse and/or neglect. For example: If you tell us information concerning suspected child abuse and/or neglect, we are required by Texas law to disclose this information.
- We may disclose your health information to our business associates. Some services are provided to Shield Bearer Counseling Centers through our business associates. For example: some counselors are contracted providers. When services are contracted, we may disclose your health information to our business associates so they can do the job we've asked them to do. Our contracts with our business associates require them to protect your health information.
- We may disclose your health information to respond to third-party payer audits. For example: Third-party payers may request that we give evidence of services provided. For that purpose, we allow them to inspect treatment and other records. Your health information may be requested and reviewed by auditors as part of that process. The information that auditors review is expected to remain confidential.

- We will disclose your health information to law enforcement, under certain circumstances. For example: If we receive a court order, we will disclose your health information. If you commit, or threaten to commit, a crime on the premises or against program personnel, we may disclose your health information to law enforcement officials.
- We may disclose your health information to individuals involved in disaster relief. For example: If a disaster occurs, we may disclose health information about you to some agencies assisting in a disaster relief effort.
- We may disclose your health information, under certain circumstances, for research purposes; however, all specific individual identifying information will be kept confidential. For example: In limited circumstances, we may disclose your health information for research purposes, when the Privacy Board of Shield Bearer Counseling Centers has approved a waiver of authorization. The health information a prospective researcher reviews may not leave the facility.
- For clients receiving mental health treatment, we may disclose your health information for purposes of treatment, payment, and health-care operations. For example: We may disclose your health information to your physician in order to assist your treatment. If your insurance coverage is denied, we may disclose your health information to an alternative funding source in order to receive payment. We may disclose your health information to coordinate your case management.
- We may disclose your health information when required to do so by law. For example: We will disclose health information about you when required to do so by federal, state, or local law.

### *Your Health Information Rights*

Although your health record is the physical property of Shield Bearer Counseling Centers, the information belongs to you. You have the right to:

- Obtain a paper copy of this notice of information practices upon request;
- Inspect and copy your health record as provided for in 45 CFR 164.524;
- Amend your health record as provided in 45 CFR 164.528;
- Request copies of authorizations that we have asked you to sign;
- Obtain an accounting of disclosures of your health information as provided in 45 CFR 164.528;
- Request a restriction on certain uses and disclosures of your information as provided by 45 CFR 164.522;
- Revoke (in writing) your authorization to use or disclose health care information, except to the extent that action has already been taken.
- Request confidential communication of your health care information.

You have a right to request that we communicate with you about health matters in a certain way or at a certain location. For example, when we contact you about appointments, treatment information, etc., you can ask that we contact you only at work or only by mail at your home. To request confidential communications, you must make your request in writing. Your request must specify how or where you wish to be contacted. We will not ask you the reason for your request and will accommodate all reasonable requests. In the event that you do not specify how or where you wish to be contacted, Shield Bearer Counseling Centers will make reasonable efforts not to reveal our identity and our relationship to you.

### *Our Responsibilities*

Shield Bearer Counseling Centers is required to:

- Maintain the privacy of your health care information;
- Provide you with this notice regarding our legal duties and privacy practices regarding information we collect and maintain about you;
- Notify you if we are unable to agree to a requested restriction;
- Accommodate reasonable requests you may have to communicate health information in a confidential manner;
- Abide by the terms of this notice.

We reserve the right to change our practices and to make the new provisions effective for all protected health care information we maintain. If we change our information practices, we will provide a revised notice to you, either in person or by mail at the address you've supplied us.

In addition, any revisions to this notice will be posted on the Shield Bearer Counseling Centers Website ([www.ShieldBearer.org](http://www.ShieldBearer.org)). We will not use or disclose your health information without your authorization, except as described in this notice. We will also discontinue to use or disclose your health care information after we have received a written revocation of the authorization, according to the procedures included in the authorization.

### *For More Information or To Report a Problem:*

If you have questions or would like additional information, you may contact Shield Bearer Counseling Centers' privacy officer, Brittany Johns, at (281)894-7222 or write: Privacy Officer, Shield Bearer Counseling Centers, 12345 Jones Rd. STE 285 Houston, TX 77484. If you believe your privacy rights have been violated, you may file a complaint with your program's director or with the privacy officer at the above address. All persons also have the right to file a complaint with the Office for Civil Rights, U. S. Department of Health and Human Services. There will be no retaliation for filing a complaint with Shield Bearer Counseling Centers, the Department of Mental Health, or the Office for Civil Rights.