

# Silver Linings Counseling, PLLC

## NOTICE OF PRIVACY PRACTICES

**This notice describes how health information about you may be used and disclosed, and how you can obtain access to this information. Please review it carefully and keep this document for your records. The effective date of this document is March 28, 2016.**

Our staff uses health information about you for treatment, to obtain payment for treatment, for administrative purposes, and to evaluate the quality of care that you receive. Your health information is contained in a medical record that is the physical property of Silver Linings Counseling, PLLC.

We May Use or Disclose Your Health Information for:

**Treatment.** We may use your health information to provide you with mental health treatment or services. For example, information obtained by a mental health provider, such as a psychiatrist, psychologist, social worker, or other person providing mental health services to you, will record information in your record that is related to your treatment. This information is necessary for mental health providers to determine what treatment you should receive. Mental health providers will also record actions taken by them in the course of your treatment and note how you respond to the actions.

**Payment.** We may use and disclose your health information to others for purposes of receiving payment for treatment and services that you receive. For example, a bill may be sent to you of a third-party payer, such as an insurance company or health plan. The information on the bill may contain information that identifies you, your diagnosis, and treatment or supplies used in the course of treatment or service.

**Health Care Operations.** We may use and disclose health information about you for operational purposes. For example, your health information may be disclosed to members of the clinical staff, risk or quality improvement personnel, and other to:

- evaluate the performance of staff;
- assess the quality of care and outcomes in your cases and similar cases;
- learn how to improve our facilities and services; and
- determine how to continually improve the quality and effectiveness of the mental health care we provide.

**Appointments.** We may use your information to provide appointment reminders or information about treatment alternatives or other health-related benefits and services that may be of interest to you.

**Required by Law.** We may use and disclose information about you as required by law. For example, we may disclose information for the purposes:

- for judicial and administrative proceedings pursuant to legal authority;
- to report information related to victim of abuse, neglect or domestic violence; and
- to assist law enforcement officials in their law enforcement duties.

**Public Health.** Your health information may be used or disclosed for public health authorities or other legal authorities to prevent or control disease, injury, or disability or for other health oversight activities.

**Decedents.** Health information may be disclosed to funeral directors or coroners to enable them to carry out their lawful duties.

**Organ/Tissue Donation.** Your health information may be used or disclosed for cadaveric organ, eye or tissue donation.

**Research.** We may review your mental health information to determine if your protected health information is needed for research projects. To the extent that information is needed, an institutional review board or privacy board will review the research proposal and established protocols to ensure the privacy of your health information.

**Health and Safety.** Your health information may be disclosed to avert a serious threat to the health and safety of you or any other person pursuant to applicable law.

**Government Functions.** Your health information may be disclosed for specialized government functions such as protection of public officials or reporting to various branches of the armed forces.

**Workers' Compensation.** Your health information may be used or disclosed in order to comply with laws and regulations related to Workers' Compensation.

**Other Uses.** Other uses and disclosures will be made only with your written authorization and you may revoke the authorization except to the extent we have relied on it.

**Your Health Information Rights** You have the right to:

- request restriction on certain uses and disclosures of your information as provided; however, we are not required to agree to a requested restriction;
- to obtain a paper copy of this notice of Privacy Practices upon request;
- inspect, and obtain a copy of your health record as provided by law;
- request communications of your health information by alternative means or at alternative locations;
- revoke your authorization to use or disclose health information except to the extent we have already taken action based upon your authorization; and
- receive an accounting of disclosures made of your health information.

If you have any questions or complaints, please contact your clinician or Dustin Shepler, PhD, LP, at Silver Linings Counseling, PLLC. You may also complain to the Department of Health and Human Services if you believe your privacy rights have been violated. You will not be retaliated against for filing a complaint.

We reserve the right to change our privacy practices and to make the new provisions effective for all protected health information we maintain. Revised notices will be made available to you at our offices, and via mail.