NOTICE OF PRIVACY PRACTICES (NPP; HIPPA)

KU Child and Family Services Clinic

Effective Date: February 23, 2016

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.

SUMMARY

This page of the Notice of Privacy Practices ("NPP") provides a *brief summary* of the privacy practices of KU Child and Family Services Clinic and your privacy rights. Please read the entire document for a full description of our practices and your rights. If you need more information, you may call (785) 864-4416.

Our responsibilities regarding your health-related information. Each time you utilize KU Child and Family Services Clinic, a record is generated. This record contains health-related information about you. KU Child and Family Services Clinic is required by law to protect the privacy of your health information. We are providing you with this NPP. We agree to abide by the terms of the NPP currently in effect and will notify you if we are unable to agree to a requested restriction on use or disclosures of your health-related information.

Uses and Disclosures of Protected Health Information.

a. You will be asked to sign a written consent that enables KU Child and Family Services Clinic to use and disclose your health-related information for treatment and operations (such as registering you for services). KU Child and Family Services Clinic may also contact you regarding appointments.

b. Under certain circumstances, uses and disclosures <u>without</u> your written consent or authorization may take place. For example, KU Child and Family Services Clinic may disclose information about you when there is an emergency, for public health purposes, for health oversight audits or inspections, as required by law, for research studies (as permitted by law), and for law enforcement/legal proceedings.

Your Rights Regarding Your Health-Related Information. You have the right to inspect and copy information in your file, request an amendment of health-related information you believe to be incorrect or incomplete, request restrictions on uses and disclosures, request special confidential communications, request accounting of non-routine disclosures, and receive a written copy of this NPP. You may file a complaint by contacting KU Child and Family Services Clinic at (785) 864-4416 or by contacting the University's HIPAA Privacy Officer, Lawrence Campus, at (785) 864-9528. KU Child and Family Services Clinic reserves the right to change this NPP, and the revised NPP will be effective for information KU Child and Family Services Clinic already has about you as well as information received in the future.

INTRODUCTION

Each time you visit KU Child and Family Services Clinic, a record of your visit is made. This record typically contains health-related information about you, including information regarding symptoms, observations, assessments (including test results, diagnoses, treatment, and mental health), a plan for future care or treatment, and billing-related information. This Notice of Privacy Practices ("NPP") describes how KU Child and Family Services Clinic may use and disclose your health-related information. It also describes your rights and responsibilities regarding the use/disclosure of your health-related information. This NPP applies to all of the records of your care generated by KU Child and Family Services Clinic.

OUR RESPONSIBILITIES REGARDING YOUR HEALTH INFORMATION

KU Child and Family Services Clinic is required by law to protect the privacy of your healthrelated information. We are providing you with this NPP. We agree to abide by the terms of the NPP currently in effect and will notify you if we are unable to agree to a requested restriction on use or disclosure of your health-related information.

1. Uses and Disclosures <u>With</u> Your Written Consent

You will be asked to sign a written consent form enabling KU Child and Family Services Clinic to use and disclose your health-related information to specific providers or agencies for treatment, payment and health care operations as described in this section:

a. <u>**Treatment.**</u> KU Child and Family Services Clinic will use and disclose health-related information about you or your child within the Clinic to provide and coordinate your care. For example, all members of the staff that are involved in your treatment, including Clinic associates and supervisors, will use the information for treatment and training purposes. In addition, your health-related information may be provided to another provider or agency only when you have given written permission for information to be exchanged with that provider or agency.

b. <u>Payment</u>. KU Child and Family Services Clinic will use and disclose your name and address to bill and collect payment from you. Although KU Child and Family Services Clinic does not bill insurance companies directly, you may be able to submit reimbursement for yourself. If you have any questions regarding the privacy practices of your insurance company or third party payer, you should contact them directly.

c. <u>Health Care Operations</u>. KU Child and Family Services Clinic will use health-related information internally about you for treatment and educational purposes. KU Child and Family Services Clinic may disclose information to Clinic associates, Clinic coordinators, and supervisors for training purposes.

Members of KU Child and Family Services Clinic staff involved in quality improvement may use information in your health record to assess the care and outcomes in your case and others like it. For example, KU Child and Family Services Clinic may analyze information about many clients to evaluate the need for new services, resources or treatment and to see where we can make improvements. The results will then be used to continually improve the quality of care for all patients we serve. KU Child and Family Services Clinic may also contact you to assess your satisfaction with our services.

2. Uses and Disclosures Without Your Consent or Authorization

KU Child and Family Services Clinic may use or disclose health-related information without consent or authorization when there is an emergency, for example the need to prevent a client from harming him/herself or others. In addition, KU Child and Family Services Clinic may use or disclose your health-related information without your consent or authorization in the following circumstances:

a. <u>As Required by Law</u>. KU Child and Family Services Clinic may use and disclose health-related information to the following types of entities, including but not limited to:

- Public health authorities or legal authorities, such as the Department of Child and Family Services or other agencies, charged with tracking or responding to reports of abuse or neglect.
- Health oversight agencies
- Military command, national security or intelligence authorities

b. **Law Enforcement/Legal Proceedings.** KU Child and Family Services Clinic may disclose health information for law enforcement purposes as required by law or in response to a valid subpoena or other legal process.

c. <u>Research</u>. KU Child and Family Services Clinic may disclose medical information to researchers when their research has been approved by an institutional review board that has reviewed the research proposal and established protocols to ensure the privacy of your health-related information.

3. Other uses and Disclosures of Health-Related Information Based on Your Authorization

Other uses and disclosures of health-related information not covered by this NPP or by the laws that apply to KU Child and Family Services Clinic will be made only with your written permission. If you provide KU Child and Family Services Clinic with permission to use or disclose health-related information about you, you may revoke that permission, in writing, at any time.

YOUR RIGHTS REGARDING YOUR HEALTH-RELATED INFORMATION

You have the following rights regarding medical information we maintain about you:

- <u>Right to Inspect and Copy</u>. You have the right to inspect and have copied health-related information used to make decisions about your care. Usually, this includes medical and billing records, but may not include some records such as psychotherapy notes. Additionally, copyrighted materials, such as treatment and assessment tools, may not be able to be photocopied. Your request must be submitted in writing. A fee may be charged for the costs of processing your request.
- <u>Right to Amend</u>. If you feel that health information KU Child and Family Services Clinic has about you is incorrect or incomplete, you may ask us to amend (i.e., add to or append) additional information. To request such an addition to your record, you must submit your request in writing. You will be asked to provide a reason to support your request.
- <u>Right to Request Restrictions</u>. You have the right to request a restriction or limitation on the health information KU Child and Family Services Clinic uses or discloses about you for treatment, payment or health care options. KU Child and Family Services Clinic is not required to agree to your request. If the request is approved by KU Child and Family Services Clinic, the Clinic will comply with your request unless the information is needed to provide you with emergency treatment. To request restrictions, you must make your request in writing.
- <u>Right to Request Confidential Communications</u>. You have the right to request that KU Child and Family Services Clinic communicate with you about health-related matters in a certain way or at certain locations. You must make your request in writing. KU Child and Family Services Clinic will accommodate all reasonable requests.
- <u>Right to an Accounting of Disclosures</u>. You have the right to receive a list of disclosures. This list will not include all disclosures made. For example, this list will not include disclosures for treatment, payment, health care operations, disclosures made prior to April 14, 2003, or disclosures you specifically authorized. To request this list you must submit your request in writing.
- <u>Right to a Paper Copy of this Notice</u>. You have the right to obtain a paper copy of this NPP, and you may ask the KU Child and Family Services Clinic to give you a copy of this NPP at any time.

You can contact the KU Child and Family Services Clinic at (785) 864-4416 to obtain a copy of the appropriate form to submit with your request.

COMPLAINTS. If you believe your privacy rights have been violated, you may file a complaint with KU Child and Family Services Clinic by contacting the Clinic at (785) 864-4416 or by contacting the University's HIPAA Privacy Officer, Lawrence Campus, at (785) 864-9528. You may also contact the Secretary of Health and Human Services. There will be no retaliation for filing a complaint.

CHANGES TO THIS NOTICE. KU Child and Family Services Clinic reserves the right to change this NPP and the revised NPP will be effective for information KU Child and Family Services Clinic already has about you as well as information received in the future. Should our practices change, KU Child and Family Services Clinic will post a revised NPP in the Clinic. Paper copies will be available upon request.

QUESTIONS AND INFORMATION. If you have any questions about this notice, please contact the Clinic.