



NOTICE OF PRIVACY PRACTICES

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.

This notice is effective on June 1, 2017

The Health Insurance Portability & Accountability Act of 1996 (HIPAA) requires all health care records and other individually identifiable health information (PROTECTED HEALTH INFORMATION) used or disclosed to us in any form, whether electronically, on paper, or orally, be kept confidential. This federal law gives you, the patient, significant new rights to understand and control how your health information is used. HIPAA provides penalties for covered entities that misuse personal health information. During the process of providing services to you, Real Connections Counseling, LLC, located in Urbandale, IA, will obtain and use mental health and medical information concerning you that is both confidential and privileged. Ordinarily this confidential information will be used in the manner that is described in this statement, and will not be disclosed without your consent, except for the circumstances described in this Notice.

Without specific written authorization, we are permitted to use and disclose your health care records for the purposes of treatment, payment and health care operations, as appropriate.

I. USES AND DISCLOSURES OF PROTECTED INFORMATION.

General Uses and Disclosures Not Requiring the Clients Consent. **Real Connections Counseling, LLC** will use and disclose protected health information in the following ways:

- **Treatment.** Treatment refers to the provision, coordination, or management of mental health care and related services by one or more health care providers. For example, **Real Connections Counseling, LLC** therapists and staff involved with your care may use your information to plan your course of treatment and consult with other health care professionals, therapists, or their staff concerning services needed or provided to you,
- **Payment to Insurance Companies.** Payment refers to the activities undertaken by a health care provider to obtain or provide reimbursement for the provision of health care. For example, **Real Connections Counseling, LLC** and other health care professionals will use information that identifies you, including information concerning your diagnosis, services provided to you, dates of services, and services needed by you, and may disclose such information to insurance companies, to businesses that review bills for health care services and handle claims for payment of health care benefits in order to obtain payment for services. If you are covered by Medicaid, information may be provided to the State of Iowa's Medicaid program, including but not limited to your treatment, condition, diagnosis, and services received. ****At this time, Real Connection Counseling, LLC does not take insurance, so this would not apply****
- **Health Care Operations.** Health Care Operations means activities undertaken by health insurance companies, businesses that administer health plans, and companies that review bills for health care services in order to process claims for health care benefits. These functions include management and administrative activities. For example, such companies may use your health information in monitoring of service quality, staff training and evaluation, medical reviews, legal services, auditing functions, compliance programs, business planning and accreditation, certification, licensing, and credentialing activities.
- **Contacting the Client.** **Real Connections Counseling, LLC** staff may contact you to remind you of appointment and tell you about treatments or other services that might be of benefit to you. Be sure to let RCC know where and by what means (e.g., telephone, letter, email, fax) you may be contacted.
- **Required by Law.** **Real Connections Counseling, LLC** will disclose protected health information when required by law. This includes, but is not limited to: (a) reporting child abuse or neglect to the Department of Human Services or to law enforcement, as compelled by the Iowa Child Abuse and Neglect Reporting Law; (b) when court ordered to release information; (c) when there is legal duty to warn of a threat that a client has made of imminent physical violence, healthcare professionals are required to notify the potential victim of such a threat and report it to law enforcement; (d) when a client is imminently dangerous to herself/himself for others, or is gravely disabled, healthcare professionals may have a duty to hospitalize the client in order to

obtain a 72-hour evaluation of the client; (e) when required to report a threat to the national security of the United States; and (f) a reasonable suspicion of elder or dependent adult abuse, disclosure is compelled by the Iowa Elder/Dependent Adult Abuse Reporting Law.

- **Health Oversight Activities.** Your confidential, protected health information may be disclosed to health oversight agencies for oversight activities authorized by law and necessary for the oversight of the health care system, government health care benefit programs, and regulatory programs or determining compliance with program standards.
- **Crimes on the Premises or Observed by Real Connections Counseling, LLC personnel.** Crimes that are observed by **Real Connections Counseling, LLC** staff that are directed toward staff, or occur on **Real Connections Counseling, LLC** premises will be reported to law enforcement.
- **Business Associates.** Confidential healthcare information concerning you, provided to insurers or to plans for purposes or payment for services that you receive may be disclosed to business associates. For example, some administrative, clinical, quality assurance, billing, legal, auditing, and practice management services may be provided by contracting with outside entities to perform those services. In those situations, protected health information will be provided to those contractors as needed to perform their contracted tasks. Business associates are required to enter into an agreement maintaining the privacy of the protected health information released to them.
- **Oversight Activities or Disclosure that is Otherwise Specifically Required by Law.** If **Real Connections Counseling, LLC** receives a subpoena from the Iowa Board of Behavioral Sciences for your protected health information, we must comply with that subpoena and disclose that information to the Board. **NOTE:** Judicial and Administrative Proceedings-If you are involved in a court proceeding and a request is made about the professional services provided you or the records thereof, such information is privileged under state law, and we will not release information without your written consent 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.
- **Research.** Protected health information concerning you may be used with your permission for research purposes if the relevant provisions of the Federal HIPPA privacy regulations are followed.
- **Involuntary Clients.** Information regarding clients who are being treated involuntarily, pursuant to law, will be shared with other treatment providers, legal entities, third party payors, and others, as necessary to provide the care and management coordination needed in compliance with Iowa law.
- **Family Members.** Except for certain minors, incompetent clients, or involuntary clients, protected health information cannot be provided to family members without the client's consent. In situations where family members are present during a discussion with the client, and it can be reasonable inferred from the circumstances that the client does not object, information may be disclosed in the course of that discussion. However if the client objects, protected health information will not be disclosed.
- **Emergencies.** In life-threatening emergencies, **Real Connections Counseling, LLC** staff will disclose information necessary to avoid serious harm or death.
- **Client Release of Information or Authorization.** **Real Connections Counseling, LLC** and other healthcare professionals may not use or disclose protected health information in any way without a signed release of information or authorization. When you sign a release of information, or an authorization, it may later be revoked, provided that the revocation is in writing. The revocation will apply, except to the extent that **Real Connections Counseling, LLC** has already taken action in reliance thereon.

II. YOUR RIGHTS AS A CLIENT

- Access to Protected Health Information.** You have the right to receive a summary of confidential health information concerning you with regard to mental health services needed or provided to you. There are some limitations to this right, which will be provided to you at the time of your request, if such limitation applies. To make this request, ask **Real Connections Counseling, LLC** staff for the appropriate request form.
- Amendment of Your Record.** You have the right to request that **Real Connections Counseling, LLC** to amend your protected health information. **Real Connections Counseling, LLC** is not required to amend the record if it is determined that the record is accurate and complete. There are other exceptions, which will be provided to you at the time of your request, if relevant, along with the appeal process available to you. *You also have the right, subject to limitations, to provide us with a written addendum with respect to any item or statement in your records that you believe to be incorrect or incomplete and to have the addendum become a part of your record.*
- Accounting and Disclosures.** You have the right to receive an accounting of certain disclosures **Real Connections Counseling, LLC** has made regarding your protected health information. However, that

accounting does not include disclosures that were made for the purposes of treatment, payment, or health care operations. In addition, the accounting does not include disclosures made to you, disclosures made pursuant to a signed authorization, or disclosures made prior to June 1, 2017. There are other exceptions that will be provided to you, should you request an accounting. To make a request, as **Real Connections Counseling, LLC** staff for the appropriate request form.

- D. Additional Restrictions.** You have the right to request additional resources restrictions on the use or disclosure of your health information. **Real Connections Counseling, LLC** does not have to agree to that request, and there are certain limits to any restriction, which will be provided to you at the time of your request. We are not required to agree to your requested restriction. If we do agree, **Real Connections Counseling, LLC** will maintain a written record of the agreed upon restriction.
- E. Alternative Means of Receiving Confidential Communications.** You have the right to request that you receive communications of protected health information from **Real Connections Counseling, LLC** by alternative means or at alternative locations. For example, if you do not want **Real Connections Counseling, LLC** to mail bills or other materials to your home, you can request that this information be sent to another address. There are limitations to the granting of requests, which will be provided to you at the time of the request process.
- F. You have the right to inspect and copy protected health information about you by making a specific request to do so in writing.** This right to inspect and copy is not absolute – in other words, we are permitted to deny access for specified reasons. You do not have this right of access with respect to “psychotherapy notes.” The term “psychotherapy notes” means notes recorded (in any medium) by a health care provider who is a mental health professional documenting or analyzing the contents of conversation during a private counseling session or a group, joint, or family counseling session that are separated from the rest of the individual’s medical (includes mental health) record. The term excludes: medication prescription and monitoring, counseling session start and stop times, the modalities and frequencies of treatment furnished, results of clinical tests, and any summary of the following items: diagnosis, functional status, the treatment plan, symptoms, prognosis, and progress to date.
- G. Copy of This Notice.** You have a right to obtain another copy of this notice upon request.

III. ADDITIONAL INFORMATION

- A. Privacy Laws.** Real Connections Counseling, LLC is required by state and federal law to maintain the privacy of protected health information. In addition, Real Connections Counseling, LLC is required by law to provide clients with notice of its legal duties and privacy practices with respect to protected health information. That is the purpose of this notice.
- B. Terms of the Notice and Changes to the Notice.** Real Connections Counseling, LLC is required to abide by the terms of this notice, or any amended notice that may follow. Real Connections Counseling, LLC reserves the right to change the terms of its notice and to make the new notice provision effective for all protected health information that maintains. When the notice is revised, the revised notice will be posted in service delivery sites and will be available upon request.
- C. Complaints Regarding Privacy Rights.** If you believe Real Connections Counseling, LLC has violated your rights, you have the right to complain to Real Connections Counseling, LLC owners concerning your complaint and the basis for it. You also have the right to complain to the United States Secretary of Health and Human Services by sending your complaint to the Office of Civil Rights, U.S. Department of Health and Human Services, 200 Independence Avenue, S.W., Room 515 HHH Bldg. Washington, D.C. 20201. It is the policy of Real Connections Counseling, LLC that there will be no retaliation for your filing such complaints.
- D. Additional Information.** If you desire additional information about your privacy rights at Real Connections Counseling, LLC please ask us any questions that you may have.

IV. CONFIDENTIALITY OF ALCOHOL AND DRUG ABUSE PATIENT RECORDS

- A.** The confidentiality of alcohol and drug abuse patient records maintained by **Real Connections Counseling, LLC** is protected by federal law and regulations. Generally the program may not say to a person outside the program that a patient attends the program, or disclose any information identifying a patient as an alcohol or drug abuser unless:
 - a.** The patient consents in writing
 - b.** The disclosure is allowed by a court order; or
 - c.** The disclosure is made to medical personnel in a medical emergency or to qualified personnel for research, audit, or program evaluation

- B.** Violation of the Federal Law and Regulations by a Program is a Crime. Suspected violations may be reported to appropriate authorities in accordance with federal regulations.
- C.** Federal law and Regulations to not protect any information about a crime committed by a patient either at the program or against any person who works for the program or about any threat to commit such a crime. Disclosure may be made concerning any threat made by a client to commit imminent physical violence against another person to the potential victim who has been threatened and law enforcement.
- D.** Federal law regulations do not protect any information about suspected child abuse or neglect from being reported under state law to appropriate state or local authorities.

You have the right to file a formal, written complaint with us at the address below, or with the Department of Health and Human Services, Office of Civil Rights, in the event you feel your privacy rights have been violated. We will not retaliate against you for filing a complaint.

Also: The Iowa Board of Public Health has the general responsibility of regulating the practice of licensed psychologists, licensed clinical social workers, licensed professional counselors, licensed marriage and family therapists, and those in the process of licensure. For information or concerns, the contact information for this Board is:

Iowa Board of Public Health
Lucas State Office Bldg, 5th Floor
321 East 12th Street
Des Moines, IA, 50319
Phone: 515-281-0254
or online at: www.idph.iowa.gov

For more information about HIPAA or to file a complaint:

The U.S. Department of Health & Human Services Office of Civil Rights
200 Independence Avenue, S.W.
Washington, D.C. 20201

877-696-6775 (toll-free)