



### **Privacy Practice Notice**

**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.**

**Effective date: March 3, 2019**

Thrive Counseling is committed to protecting health information about you by complying with all applicable federal and state privacy and confidentiality laws and regulations. These laws require that health information that identifies you is kept private and confidential. These laws also require that we give you this notice of our legal duties and privacy practices with respect to health information about you, and that we follow the terms of the notice that is currently in effect.

#### **Your Rights**

**When it comes to your health information, you have certain rights. This section explains your rights and some of your provider's responsibilities to help you.**

- Get a copy of your medical record: You can ask to see or get a copy of your medical record. This right to inspect and receive a copy is not absolute.
- Request Confidential Communications: You can ask us to contact you in a specific way (home, office, cell) or send mail to a different address. Normally we will communicate with you through the phone number and address that you provide to us. If you desire us to use alternative methods of communication, you may provide us with a written request.
- Right to Amend Your Record: You have the right to amend your health information in our records by making a request to do so in a writing that provides a reason to support the requested amendment. This right to amend is not absolute – in other words, we are permitted to deny the requested amendment for specified reasons. 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. If your requested amendment to your records is accepted, a copy of your amendment will become a permanent part of our records. When we "amend," a record, we may append information to the original record, as opposed to physically removing or changing the original record.
- Right to Request Restrictions: You have the right to request restrictions on certain uses and disclosures of health information about you, such as those necessary to carry out treatment, payment, or health care operations. We are not required to agree to your requested restriction. If we do agree, we will maintain a written record of the agreed upon restriction.
- File a complaint: You can complain if you feel we have violated your rights by contacting us at Thrive Counseling and Consultation, 2085 County Road D East, Suite B100, Maplewood MN 55109. You can also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to: 200 Independence Avenue, S.W., Washington D.C., 20201.
- Get a copy of this notice: You can ask for a paper copy of this notice at any time.

- Obtain a list of who we have shared your information with: You can ask for a list of those we have shared your information with for six years prior to the day you ask and why. As with other rights, this right is not absolute. In other words, we are permitted to deny the request for specified reasons. For instance, we do not have to account for disclosures made in order to carry out our own treatment, payment or health care operations. We also do not have to account for disclosures of protected health information that are made with your written authorization. If you request an accounting more than once during a twelve (12) month period, there will be a charge. You will be told the cost prior to the request being filled.

### **Uses and Disclosures With Your Authorization**

- Generally, we will use or disclose your health information only when you give your authorization in writing for us to do so. You may revoke your authorization except to the extent that we have already taken action upon the authorization. There are some exceptions and special rules that allow for uses and disclosures without your authorization or consent, which are listed below.

### **Uses and Disclosures Without Your Authorization: All Protected Health Information**

Even when you have not given your written authorization, we may use and disclose information under the circumstances listed below:

- **Treat you:** We may use or disclose health information about you for treatment purposes. Treatment includes diagnosis, treatment and other services, including discharge planning. For example, if your counselor decides to consult with another health care provider about your condition, your counselor would be permitted to use and disclose your personal health information, which is otherwise confidential, in order to assist your counselor in the diagnosis or treatment of your mental health condition. In addition, counselors may disclose your health information to each other to coordinate individual and group therapy sessions for your treatment or to discuss information about treatment alternatives or other health-related benefits and services that are necessary or may be of interest to you.
- **Bill for services:** We can use and share your health information to bill and get payment from health plans or other entities.
- **Health Care Operations:** We may use or disclose health information about you for the purposes of health care operations that include internal administration and planning and various activities that improve the quality and effectiveness of care. For example, if your health plan decides to audit a provider at Thrive Counseling in order to review our competence and our performance, or to detect possible fraud or abuse, your health information may be used or disclosed for those purposes.

### **How Else Can we Use Or Share Your Healthcare Information?**

- **As Required By Law:** We can share information about you in response to a court or administrative order, or in response to a subpoena. We will share information about you if state or federal law require it, including with the Department of Health and Human Services if it wants to see that we are complying with federal privacy law.
- **To Avert a Serious Threat To Health Or Public Safety:** We can share information about you for certain situations such as preventing disease; helping with product recalls; reporting adverse reactions to medications; reporting suspected abuse, neglect, or domestic violence; preventing or reducing a serious threat to anyone's health or safety.

- Death: We can share health information with a coroner, medical examiner, or funeral director when an individual dies.
- Respond To Organ and Tissue Donation Requests: We can share health information about you with organ procurement organizations.
- Worker's Compensation: We can use or share information for you for worker's compensation claims; for law enforcement purposes or with a law enforcement official; with health oversight agencies for activities authorized by law; for special government functions such as military, national security, and presidential protective services.
- Research: We can use or share your information for health research.

#### **Our Responsibilities:**

- We are required by law to maintain the privacy and security of you protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time and let us know in writing.

#### **Effective Date ad Right To Change the Terms Of This Notice:**

We can change the terms of this notice and the changes will apply to al information we have about you. The new notice will be available upon request, in our office, and on our website.

*Notice is effective March 3, 2019*

#### **Privacy Officer:**

Sandra Woolsey, MA LPCC LAMFT

Thrive Counseling and Consultation PLLC

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Maplewood MN 55109

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