

Meadows Counseling, LLC recognizes the importance of protecting client health information. As such, the following information will be included in our Notice of Privacy Practices that is given to the client upon the onset of treatment:

I. Uses and Disclosures for Treatment, Payment, and Healthcare Operations

o Meadows Counseling, LLC may use or disclose protected health information (PHI), for treatment, payment, and healthcare operations purposes.

II. Uses and Disclosures Requiring Authorization

Meadows, LLC may use or disclose PHI for purposes outside of treatment, payment, or health care operations when appropriate authorization is obtained. An “authorization” is written permission above and beyond the general consent that permits only specific disclosures. In those instances when we are asked for information for purposes outside of treatment, payment, or healthcare operations, we will obtain an authorization from the client before releasing this information.

Our authorizations may be revoked at any time, provided each revocation is in writing. In authorization may not be revoked to the extent that (1) we have taken action in reliance on that authorization; or (2) if the authorization was obtained as a condition of obtaining insurance coverage, and the law provides the ensure the right to contest the claim under the policy.

III. Uses and Disclosures with Neither Consent nor Authorization

We may use or disclose PHI without consent or authorization in the following circumstances:

o **Child Abuse** – When we have reasonable cause to believe that a child has been subjected to abuse or neglect, or if we observe a child being subjected to conditions which would reasonably result in abuse or neglect, we must report this to the proper law enforcement agency and/or to the Nebraska Department of Health and Human Services.

o **Adult and Domestic Abuse** – When we have reasonable cause to believe that a vulnerable adult has been subjected to abuse or if we observe such an adult being subjected to conditions which would reasonably result in abuse, we must report this to the appropriate law enforcement agency and/or to the Nebraska Department of Health and Human Services.

o “Vulnerable adult” shall mean any person 18 years of age or older who has had substantial mental or functional impairment or for whom a guardian has been appointed under the Nebraska Probate Code.

o **Health Oversight Activities** – For the purpose of any investigation of the counselor, the Director of Health and Human Services or the Director of Regulation and Licensure or the Office of Mental Health Substance Abuse and Other Addictions (the boards and offices that certify and licenses us to practice) may subpoena relevant records from us.

o **Judicial and Administrative Proceedings** – If our clients are involved in a court proceeding and a request is made for information about their diagnosis and treatment and the records thereof, such information is privileged under state law, and we will not release information without the written authorization form from the client or their personal or legally-appointed representative, or a court order. The privilege does not apply when our client is being evaluated for a third party or where the evaluation is court ordered. The client will be informed in advance if this is the case.

o **Serious Threat to Health or Safety** – If a client communicates to us a serious threat of physical violence against a reasonably identifiable victim or victims, we must communicate such a threat to the victim or victims and to a law enforcement agency. Federal law and regulations do not protect any information about a crime committed by a client either at the program or against a person who works for the program or about any threat to commit such a crime.

o **Emergency** – If you, our client, have a medical emergency, we will share information with medical professionals to assist them in providing necessary health care.

o **Worker’s Compensation** – If our client files a worker’s compensation claim, we must, on demand, make available records relevant to that claim to their employer, the insurance carrier, the worker’s compensation court, and to the client.

IV. Clients’ Rights And Provider’s Duties

Clients’ Rights

o **Right to Request Restrictions** – Clients have the right to request restrictions on certain uses and disclosures of protected health information. However, we are not required to agree to the requested restriction.

o Right to Receive Confidential Communications by Alternative Means and at Alternative Locations – Clients have the right to request and receive confidential communications of PHI by alternative means and at alternative locations. (For example, they may not want a family member to know that they are seeing us. On their request, we will send their bills to another address).

o Right to Inspect And Copy – Clients have the right to inspect or obtain a copy (or both) of PHI in our mental health, substance abuse, and billing records used to make decisions about them for as long as the PHI is maintained in the record. We may deny their access to PHI under certain circumstances, but in some cases, they may have this decision reviewed. On their request, we will discuss with them the details of the request and denial process.

o Right to Amend – Clients have the right to request an amendment of PHI for as long as the PHI is maintained in the record. We may also deny this request if deemed necessary by the primary care provider. Upon request, we will discuss with them the details of the amendment process.

o Right to an Accounting – Clients generally have the right to receive an accounting of disclosures of PHI for which they have neither provided consent nor authorization (as described in Section III of our notice). On their request, we will discuss with them the details of the accounting process.

o Right to a Paper Copy – Clients have the right to obtain a paper copy of this notice of privacy practices from us upon request, even if they have agreed to receive the notice electronically.

o Rights for Substance Abuse Clients – Federal law protects the confidentiality of alcohol and drug abuse client records. It requires that alcohol and drug abuse clients may not be made more vulnerable by reason of the availability of client records than a person who has a problem and does not seek treatment. Meadows Counseling, LLC will not let a person outside our program know that you are a client here and we will not disclose any information identifying them as an alcohol or drug abuser unless:

A. they consent in writing,

B. the disclosure is allowed by a court order,

C. the disclosure is made to medical personnel in an emergency or to qualified personnel for research, audit, or program evaluation. Federal law and regulation by a program is a crime. Suspected violations may be reported to appropriate authorities in accordance with federal regulations. Federal law and regulations do not protect any information about a crime committed by a client either at the program or against any person who works for us or about any threat to commit such a crime. Federal laws and regulations do not protect any information about suspected child abuse or neglect or abuse or neglect of a vulnerable adult from being reported under state law to appropriate authorities.

Provider's Duties:

- We are required by law to maintain the privacy of PHI and to provide our clients with a notice of our legal duties and privacy practices with respect to PHI.
- We reserve the right to change the privacy policies and practices described in this notice. Unless we notify our clients of such changes, however, we are required to abide by the terms currently in effect.
- If we revise our policies and procedures, we will post a notice that a change has been made, and the clients may pick up a copy from any staff member.