



## NOTICE OF PRIVACY PRACTICES

Effective March 1<sup>st</sup>, 2016

### PRIVACY POLICY

Open Hearts Family Wellness is committed to promoting individuals' understanding of privacy practices and maintaining the privacy of your health information. We are required by law to maintain the confidentiality of your health information.

This notice describes how information about you, as a client of Open Hearts, may be used and disclosed, and how you can get access to your information. You have the right to the confidentiality of your health information and the right to approve or refuse the release of specific information except when the release is required by law.

### Use and disclosure of your health information:

The following circumstances may require us to use or disclose your health information:

1. For Treatment. We may use health information about you to provide you with treatment or services. We may also disclose health information about you to people outside the agency who may be involved in your care (such as prescriptions or lab work) and in your medical care after you leave.
2. For Payment. We may use and disclose health information about you so that the treatment and services you receive may be billed to and payment may be collected from you, an insurance company or third party including obtaining pre-authorizations for services.
3. For Health Care Purposes. We may use the information for clinical review of performance of our personnel.
4. Appointment Reminders. We may use and disclose health information to contact you as a reminder that you have an appointment for treatment.
5. Treatment Alternatives. We may use and disclose health information to tell you about or recommend possible treatment options or alternatives that may be of interest to you.
6. As required by law. We will disclose health information about you when required to do so by federal, state, local law or by a law enforcement official. Additionally, for lawsuits and similar proceedings in response to a court or administrative order.
7. To Avert a Serious Threat to Health or Safety. We may use health information when necessary to reduce or prevent a serious threat to your health and safety or the health and safety of another individual or the public. We will only make disclosures to a person or organization able to help prevent the threat.
8. Fundraising Activities. We may use health information about you (ie, contact information) in an effort to raise money for Open Hearts and its operations. We are restricted to releasing only aggregate or anonymous information that does not specifically identify any client.
9. Military & Veterans. If you are a member of U.S. or foreign military forces and if required by the appropriate authorities.
10. Inmates. To correctional institutions or law enforcement agencies. If you are an inmate or under the custody of a law enforcement official.
11. Workers Compensation. For workers compensation or similar programs. These programs provide benefits for work-related injuries or illness.
12. Public Health Official. We may disclose health information about you for public health activities and health oversight agencies that are authorized by law to collect legally authorized information.



**Your rights regarding your health information:**

1. Communications. You can request that Open Hearts communicate with you about your health and related issues in a particular manner or at a certain location. For instance, you may ask that we contact you at home, rather than work. We will accommodate reasonable requests.
2. You can request a restriction in our use or disclosure of your health information for treatment, payment or health care operations. Additionally, you have the right to request an accounting of disclosures we made of health information about you. You have the right to request that we restrict our disclosure of your health information to only certain individuals involved in your care, such as family members and friends. We are not required to agree to your request; however, if we do agree, we are bound by our agreement except when otherwise required by law, in emergencies, or when the information is necessary to treat you.
3. You have the right to inspect and obtain a copy of the health information that may be used to make decisions about you, including patient medical records and billing records, but not including psychotherapy notes.
4. You may ask us to amend your health information if you believe it is incorrect or incomplete, and as long as the information is kept by or for our agency.
5. Right to a copy of this notice. You are entitled to receive a copy of this Notice of Privacy Practices. You may ask us to give you a copy of this notice at any time.
6. Right to file a complaint. If you believe your privacy rights have been violated, you may file a complaint with our agency or with the Secretary of the Department of Health Services. You will not be penalized for filing a complaint.
7. Right to provide an authorization for other uses and disclosures. Our agency will obtain your written authorization for uses and disclosures that are not identified by this notice or permitted by applicable law.

All requests communicated in your rights listed above must be submitted in writing to:

Open Hearts Family Wellness  
4414 N 19<sup>th</sup> Ave,

Attn: Daniel Casa, MD Privacy Officer  
Phoenix, A 85015

602-285-5550 x330

**Changes to this notice.** We reserve the right to change this notice. We reserve the right to make the revised or change notice effective for health information we already have about you as well as any information we receive in the future. We will post a copy of the current notice. Revision effective dates will be noted in the heading.

If you have any questions regarding this notice or our health information privacy policies, please contact: Daniel Casa, MD , Privacy Officer at 602-285-5550 x330.

I hereby acknowledge that I have been presented with a copy of the Open Hearts Notice of Privacy Practices.

Signature Client)/Guardian(s) \_\_\_\_\_/\_\_\_\_\_

Print Name(s) \_\_\_\_\_/\_\_\_\_\_ Date \_\_\_\_\_