



Deer Valley Counseling

"Skills for Better Living"

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.

Information that identifies you and your physical or mental health and related health care services is referred to as Protected Health Information (PHI).

Our Duties Regarding Your PHI

We are required by law to maintain the privacy of your PHI and to provide you with notice of our legal duties and privacy practices with respect to PHI. We are required to abide by the terms of this Notice of Privacy Practices (NPP). We reserve the right to change the terms of our NPP at any time. Any new NPP will be effective for all PHI that we maintain at that time. We will provide you with a copy of the revised NPP by posting a copy on our website.

How We May Use & Disclose Your PHI

For Treatment. Your PHI may be used and disclosed by those who are involved in your care for the purpose of providing, coordinating, or managing your treatment. For example, if you attend both group and individual counseling, the therapist facilitating the group may discuss your PHI with the therapist you see for individual counseling.

For Payment. We may use and disclose PHI so that we can receive payment for the treatment services provided to you. Examples of payment-related activities include: making a determination of eligibility or coverage for

insurance benefits, processing claims, billing a third party for services, or charging the credit card of someone paying for your services.

For Health Care Operations. We may use or disclose, as needed, your PHI in order to support our business activities. Examples include quality assessment, employee review, licensing, analyzing marketing effectiveness, or arranging billing or typing services. We may use your PHI for internal training or teaching purposes. We may use your PHI to suggest to you other medical and non-medical services. We may contact you to provide appointment reminders, information about treatment alternatives or other health-related benefits and services that may be of interest to you.

Without Authorization. We must disclose your PHI without your authorization under certain circumstances -

- **Required by Law.** We must disclose your PHI when required by law, such as the mandatory reporting of child abuse or neglect, mandatory reporting of unprofessional conduct of another behavioral health care licensee, or mandatory audits or investigations by government agencies such as the Arizona Board of Behavioral Health Examiners, the Arizona Department of Health or the Secretary of the Department of Health and Human Services.



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• **Required by Court Order.** We must disclose your PHI when ordered to by a court.

• **To Prevent Harm.** We must disclose your PHI when necessary to prevent or lessen a serious and imminent threat to the health or safety of you, another person or the public.

Verbal Permission. We may use or disclose your information to family members that are directly involved in your treatment with your verbal or tacit permission.

With Authorization. Uses and disclosures not specifically permitted by applicable law will be made only with your written authorization, which may be revoked.

Your Rights Regarding Your PHI

You have the following rights regarding your PHI. To exercise any of these rights, please submit your request in writing to our Privacy Officer at James Nettles, Privacy Officer, Deer Valley Counseling, 2301 W Dunlap Ave, Suite 206, Phoenix AZ 85021.

Right to Request Restrictions. You have the right to request a restriction or limitation on the use or disclosure of your PHI. We are not required to agree to your request.

Right to Request Confidential Communication. You have the right to request that we communicate with you in alternative ways or at alternative locations.

Right of Access to Inspect and Copy. You have the right, which may be restricted only in exceptional circumstances, to inspect and

copy your PHI or your minor child's PHI. Note that in couple's or family therapy, for records that pertain to more than one person, every legally competent adult whose PHI or whose minor child's PHI is contained in that record must agree in writing before that record can be released to any one of the adults. We may charge a reasonable, cost-based fee for copies.

Right to Amend. If you feel that the PHI we have about you is incorrect or incomplete, you may ask us to amend the information. We are not required to agree to the amendment.

Right to an Accounting of Disclosures. You have the right to request an accounting of certain of the disclosures that we make of your PHI. We may charge you a reasonable fee if you request more than one accounting in any 12-month period.

Right to a Copy of this Notice. You have the right to a paper copy of this notice.

Complaints

If you believe we have violated your privacy rights, you have the right to file a complaint in writing with our Privacy Officer at James Nettles, Privacy Officer, Deer Valley Counseling, 2301 W Dunlap Ave, Suite 206, Phoenix AZ 85021 or with the Secretary of Health and Human Services at 200 Independence Avenue, S.W., Washington, D.C. 20201. We will not retaliate against you for filing a complaint.

The effective date of this Notice is October 31, 2009.