

SPENCE COUNSELING CENTER, P.C.

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.

Shortened Notice of Privacy Practices

Our practice is dedicated to maintaining the privacy of your personal health information. We are required by law to do this. These laws are complicated, but we must provide you with important information. This Notice is a shortened version of the full legally required Notice of Privacy Practices (NPP) which is available in the waiting room, so refer to the Complete Notice for more information. Even in the Complete Notice, we can't cover all possible situations, so please talk to your provider or our Privacy Officer (see the end of this information) about any questions or problems.

Use and Disclosure of Your Protected Health Information (PHI)

We will use the information about your health which we get from you or from others mainly to provide you with **treatment**, to arrange **payment** for our services, or for some other business activities which are called, in the law, **health care operations**. After you have read this NPP, we will ask you to sign a **Consent Form** to agree to be treated and to let us use and share your information. **If you do not consent and sign the Consent Form, we cannot treat you.**

If we or you want to use or disclose (send, share, release) your information for any other purposes, we will discuss this with you and ask you to sign an **Authorization** to allow this.

We will keep your health information private, but there are times when the laws require us to use or share it, such as:

1. When there is a serious threat to your health and safety or the health and safety of another individual or the public. We have to report suspected child abuse or adult abuse, some instances of suicidal ideation, and some instances of homicidal ideation. We will only share information with a person or organization that we believe is able to help prevent or reduce the threat.
2. Some lawsuits and legal or court proceedings.
3. If a law enforcement official requires to do so.
4. For Worker's Compensation and similar benefit programs.

There are some situations which don't happen very often. They are described in the Complete version of the Notice of Privacy Practices, which is available in the waiting room.

Your Rights Regarding Your Health Information

1. **Restriction on Communication Channel:** You can ask us to communicate with you about your health and related issues in a particular way or at a certain place. For example, you can ask us to call you at home and not at work to schedule or cancel an appointment.
2. **Restriction of Whom PHI Communicate to:** You have the right to ask us to limit what we tell certain individuals involved in your care or the payment for your care, such as family members and friends. While we don't have to agree to your request, if we do agree, we will keep our agreement except if it is against the law, or in an emergency, or when the information is necessary to treat you.
3. **Inspect and Copy:** You have the right to look at the information we have about you, such as your medical and billing records. You can get a copy of these records but we may charge you. Psychotherapy Notes are handled in a very specific way and need a specific Authorization.
4. **Amend:** If you believe the information in your records is incorrect or incomplete, you can ask us to make some kinds of changes (called amending) to your health information.
5. **Copy of Notice:** You have the right to a copy of this notice. If we change this NPP, we will post it in our waiting room and on our website (if we have one.)
6. **Complaint:** You have the right to file a complaint if you believe your privacy rights have been violated. You can file a complaint with our Privacy Officer and/or with the Secretary of the Department of Health and Human Services. All complaints must be in writing. Filing a complaint will not change the health care we provide you in any way.
7. **Accounting and Disclosures:** When we disclose our PHI, we keep records indicating whom we sent it to, when we sent it, and what we sent. You can get an accounting (a list) of many of these disclosures.

If you have any questions regarding this notice or our health information privacy policies, please contact our Privacy Officer who is **Carl G. Spence** and he can be reached by phone at **(402) 991-0611 x202**.

Printed Name

Signature

Date