THIRD WAY CENTER

HIPAA NOTICE OF PRIVACY PRACTICES

THIS NOTICE DESCRIBES HOW THIRD WAY CENTER USES MEDICAL INFORMATION ABOUT ITS CLIENTS, HOW MEDICAL INFORMATION CAN BE RELEASED TO OTHERS AND HOW MEDICAL INFORMATION MAY BE ACCESSED. PLEASE REVIEW IT CAREFULLY.

This Notice describes how Third Way Center protects the personal health information that we have about our clients which relates to health care services received from us and how we may use and disclose this information. It also describes a client’s right to access and control their personal health information. “Personal health information” is information about a client that may identify the client and that relates to the client’s medical condition, the health care services received, any plan for future care, or the payment for health care services provided the client.

We understand a client’s health information is personal, and we are committed to protecting this information. This Notice applies to all of the records relating to a client’s health that we maintain, whether created by us or another provider.

How We May Use and Disclose a Client’s Personal Health Information

Treatment, Payment and Health Care Operations: A Third Way Center client’s personal health information may be used and disclosed by their physician, our staff, and others outside of Third Way Center that are involved in the client’s care and treatment for the purpose of providing health care services, to pay health care bills, to support the operations of Third Way Center and any other use required by law.

- **Treatment** - We may use and disclose health information about a client to provide, coordinate or manage their health care and related services. This includes coordination of health care with a third party. For example, we may send personal health information to a specialist as part of a referral. In addition, to the extent that a client receives education services on campus as part of their treatment plan, we will share health information about the client with educators within our program that is needed by the educators to provide appropriate services to the client.

- **Payment** – A client’s personal health information will be used, as needed, to obtain payment for their health care services. For example, we may give a client’s health plan, or the third party administrator who manages their health plan, information about services the client received at Third Way Center so that their health plan will pay us or reimburse the client for the services of Third Way Center.

- **Health Care Operations** - We may use and disclose personal health information to support the operations of Third Way Center. These uses and disclosures are necessary to run Third Way Center and make sure that all of our patients receive quality care. For example, we may use personal health information to review our treatment and services.

Other Uses and Disclosures

We may use or disclose a client’s personal health information for the following purposes without their authorization, as needed. These situations include: as Required by law; Public Health issues as required by law; Communicable Diseases; Health Oversight; Abuse or Neglect; Food and Drug Administration requirements; Legal Proceedings; Law Enforcement; Coroners, Funeral Directors, and Organ Donation; Research; Criminal Activity; Military Activity and National Security; Workers’ Compensation.

The following examples describe different ways that we may use and disclose a client’s personal health information:

- To contact a client for appointment reminders and to provide information about or recommend possible treatment options or alternatives that may be of interest to the client.

- To a friend or family member who is involved in a client’s care (such as to help with follow-up care).

- To our business associates if they need to receive personal health information to provide a service to us. Examples of such business associates are billing companies or data processing companies. Our business associates are also required to keep Third Way Center’s client’s personal health information confidential.

- To government regulatory agencies that have a right to collect health information or for audits, inspections and investigations.

- To law enforcement officials in response to a request made through a court order, subpoena, warrant, summons or to prevent danger or injury.

- To prevent a services threat to life or safety of a person or the public.

Other permitted and required uses and disclosures will be made only with a client’s or their parent/legal representative’s consent, authorization, or opportunity to object unless required by law. The authorization may be revoked in writing, at any time. Such authorization will be effective except to the extent that we have taken action in reliance on the authorization or if the client’s authorization was obtained as a condition of obtaining health care services.
Rights Relating to Personal Health Information

- **Right to Inspect and Copy Personal Health Information** – In most cases, a client at Third Way Center has the right to inspect and obtain a copy of their personal health information that we maintain for as long as we maintain it. If a client wants to copy their personal health information, they may be charged a fee for the costs of copying and mailing the information. In limited circumstances, we may deny a client’s request to review or obtain a copy of your personal information. If we deny the request, we will advise the client in writing of the reasons for the denial and explain their right to have the denial reviewed.

- **Right to Amend Personal Health Information** – If a client believes information that we maintain is incorrect or if important information is missing, they have the right to request that we amend it. We may deny the request to amend the information under certain circumstances. If we deny a client’s request, they have the right to file a statement of disagreement with us and we may prepare a rebuttal to their statement and will provide the client with a copy of any such rebuttal.

- **Right to Obtain a List of the Disclosures Third Way Center Has Made** – The first list a client requests within a 12-month period will be free. We may charge for our costs in responding to any additional requests.

- **Right to Request Restrictions on the Use and Disclosure of Personal Information** – Third Way Center clients have the right to ask us not to use or disclose any part of their personal health information for the purposes of treatment, payment or healthcare operations. Their request must state the specific restriction and to whom they want the restriction to apply. We are not required to agree to a requested restriction. If the client’s physician believes that is in the client’s best interest to permit use and disclosure of their personal health information, the client’s personal health information will not be restricted. The client then has the right to use another healthcare professional.

- **Right to Request Confidential Communications** – A client has the right to request that we communicate about personal health information in a certain way or at a certain location. For example, they may request that we only make contact with them at work or by mail. We will accommodate all reasonable requests.

- **Right to Obtain a Copy of this Notice** – Clients, parents and/or legal guardians have the right to request a copy of this Notice. A copy will be provided to by request.

Complaints and Reporting Violations

A client, parent and/or legal guardian may file a complaint if they believe privacy rights have been violated under HIPAA. Under no circumstances will they be penalized or retaliated against for filing a complaint.

Complaints may be sent to:

- Renee Johnson, Third Way Center (303) 780-9191
  PO Box 61385
  Denver, CO 80206

- Office for Civil Rights (303) 844-2024
  U.S. Department of Health & Human Services
  1961 Stout Street - Room 1426
  Denver, CO 80294

Violation of the Confidentiality Law by a program is a crime. Suspected violations of the Confidentiality Law may be reported to the United States Attorney in the district where the violation occurs.

We reserve the right to change the terms of this Notice and will inform clients, parents, or legal guardians of any changes by posting a revised notice on the bulletin board at each facility and will make a revised notice available in the staff office. Clients, parent and legal guardians then have the right to object or withdraw as provided in this notice.

If a client wishes to request any of the above rights or if a client has any questions about our privacy practices, they may contact the Privacy Officer at PO Box 61385, Denver, CO 80206 or (303) 780-9191. Our Privacy Officer may be contacted if a client, parent or legal guardian has questions or comments about our privacy practices.

This notice became effective on April 14, 2003.
PLEASE GIVE THE CLIENT THE NOTICE OF PRIVACY PRACTICES AND FILE THIS ACKNOWLEDGEMENT IN THE CLIENT FILE.

ACKNOWLEDGEMENT OF RECEIPT OF NOTICE OF PRIVACY PRACTICES

I, ________________________________, acknowledge receiving a complete copy of the Notice of Privacy Practices of Third Way Center on this ___ day of __________, 20___.

__________________________________________
Signature of Client

__________________________________________
Signature of Parent or Legal Guardian