

Specific Circumstances for Disclosure continued

- Judicial and administrative proceedings – in response to a court order
- Law enforcement purposes – to report criminal conduct that occurs on CS property
- Dead persons – to assist coroners and medical examiners to identify a deceased person or to determine cause of death
- For research in conformity with relevant state laws
- To avert a serious threat to health and safety – to yourself or someone else
- Specialized government functions – for protection of the President of the United States
- Workers' Compensation – to comply with laws related to Worker's Compensation

A more detailed explanation of all situations allowed by federal and state law is available upon request.

Other Uses and Disclosures of Your Information by Authorization Only

When you request information to be disclosed to another party or to yourself, CS will respond within federal and state law.

CS is required to obtain your authorization to use or disclose your protected health information for any reason other than treatment, payment, health care operations, and those specific circumstances outlined previously. CS uses an Authorization to Release and Obtain Confidential Information form that specifically states what information about you will be given to whom and for what purpose. The form is signed by you or your legal representative. You may revoke the signed authorization at any time, except to the extent that action has been taken in reliance on it, by giving your therapist/case manager a written statement to that effect.

Changes to Privacy Practices

CS reserves the right to change any of its privacy policies and related practices at any time and to make the change effective for all health information that CS maintains, as allowed by federal and state law.

You will receive notice of changes either by mail, discussion with a CS representative, electronically, or a combination of all three.

If you would like additional information concerning the privacy policy or the federal or state laws pertaining to privacy, please contact:

CS Privacy Officer
8033 Ashton Avenue, Suite 103
Manassas, Virginia 20109
703-792-7702

CS Consumer Advocate
8033 Ashton Avenue, Suite 103
Manassas, Virginia 20109
703-792-7702

Regional Human Rights Advocate
Northern Virginia Training Center
9901 Braddock Road
Fairfax, Virginia 22030
703-323-2126
1-877-600-7431 (toll free)

Office for Civil Rights (Region III)
U.S. Department of Health & Human Services
150 S. Independence Mall West - Suite 372
Philadelphia, PA 19106-3499
(215) 861-4441; (215) 861-4440 (TDD)
(215) 861-4431 FAX .



PRIVACY NOTICE

Prince William County Community Services

Effective Date: 3/15/07

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. Community Services (CS) is required by the Health Insurance Portability and Accountability Act (HIPAA), a federal law, to maintain the privacy of your health information and to provide you with this notice. CS is required to meet all procedures and standards defined in this notice.



community services
where change is possible

Web address: <http://www.pwcgov.org/csb/>



Your Privacy is Important

CS understands your privacy is important. CS will handle information about you only as allowed by federal and state law and CS policy.

If at any time you believe your privacy rights have been violated, you may verbally or in writing contact:

- CS Privacy Officer
- CS Consumer Coordinator
- Regional Human Rights Advocate
- United States Office for Civil Rights

Addresses and phone numbers to use for this contact are listed at the end of this notice. You will not suffer change in your services or retaliation for filing a complaint.

Each time you receive services from CS, your therapist/case manager or physician makes a record of the visit. Typically, this record contains your assessment, service plan, progress notes, diagnoses, treatment, and plan for future care or treatment.

Your Federally Defined Rights under HIPAA

There are several rights concerning your health information in the medical record that CS wants you to be aware of:

1. You have the right to request access to your medical record in order to inspect, copy, amend, or correct it. This right is not absolute. In certain situations, such as if access would cause harm, CS can deny access. You must make this request in writing to your therapist/case manager or to the CS Consumer Coordinator.
2. You have the right to receive at any time an accounting of CS disclosure of your medical record.
3. You have the right to request a restriction

with regards to the use or disclosure of your medical record. This request will be given serious consideration and you will be informed promptly whether CS will be able to use the restriction and still offer effective services, receive payment, and maintain health care operations. Legally CS is not required to abide by any restrictions you request.

4. You have the right to receive information from CS at the location you specify and through the means you prefer (e.g., telephone, mail).
5. You have the right to a paper copy of this notice. This document is also posted on the CS website at www.pwcgov.org/csb.

Use and Disclosure of Your Information

CS uses and discloses necessary information about you within the agency and with business associates in order to provide treatment, receive payment for treatment provided, and conduct day to day business practices. For example:

- **In order effectively to provide treatment**, your therapist/case manager may consult with various service providers within CS (e.g., psychiatrist, Emergency Services staff). During those consultations, health information about you may be shared.
- **In order to receive payment for services provided**, your health information may be sent to those companies or groups responsible for payment. In addition, CS sends a monthly bill to the responsible party identified by you and noted on your financial form.
- **In day to day business practices**, trained staff may handle your physical medical record in order to have the record assembled and available for review by your therapist/case manager and to file documentation. Certain data elements are entered into CS's computer

system that processes most billing and provides statistical reporting to the Department of Mental Health, Mental Retardation, and Substance Abuse Services (DMHMRSAS). As a part of CS's quality improvement efforts, your record may be reviewed by professional staff to assure accuracy and completeness.

Enhancing Your Healthcare

Some agency programs provide the following support to enhance your overall health care:

- Appointment reminders by telephone or letter
- Description or recommendation of treatment service alternatives
- Provision of information about health-related benefits and services that may be of interest to you.

Specific Circumstances for Disclosure

CS is allowed by federal and state law in certain circumstances to disclose specific health information about you without your consent, authorization or opportunity to agree or object. These specific circumstances may include:

- As required by law and limited to the relevant requirements of the law
- For public health activities – to the Health Department to prevent or control disease
- On behalf of children or incapacitated adults who are victims of abuse, neglect, or exploitation – to report as required by law any suspicion of abuse, neglect, or exploitation
- For health oversight activities – review by the Department of Medical Assistance (Medicaid)