



CATHOLIC CHARITIES OF THE DIOCESE OF RALEIGH, INC.

NOTICE OF PRIVACY PRACTICES

THIS NOTICE DESCRIBES HOW MEDICAL AND MENTAL HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION.

PLEASE READ IT CAREFULLY.

Catholic Charities of the Diocese of Raleigh, Inc. is required by law to protect the privacy of medical and mental health information about you and that identifies you. This may be information about health care we provide to you or payment for health care provided to you. It may also be information about your past, present, or future medical or mental health condition.

New federal regulations, called the Health Insurance Portability and Accountability Act (HIPAA), requires Catholic Charities to specifically protect “individually identifiable health information including, without limitation, all information, data, documentation, and materials, including without limitation, demographic, medical, and financial information, that relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present or future payment for the provision of health care to an individual; and that identifies the individual or with respect to which there is a reasonable basis to believe the information can be used to identify the individual.”

Catholic Charities is also required by law to provide you with the Notice of Privacy Practices explaining our legal duties and privacy practices with respect to medical and mental health information. We are legally required to follow the terms of this Notice. In other words, we are only allowed to use and disclose the protected information in the manner that we have described in this Notice.

Catholic Charities may change the terms of this Notice in the future. We reserve the right to make changes and to make the new Notice effective for all medical and mental health information that we maintain. If we make changes to the Notice, we will:

- Post the new Notice clearly in our offices
- Have copies of the new Notice available upon request

The rest of this Notice will:

- Discuss how we may use and disclose medical and mental health information about you
- Explain your rights with respect to medical and mental health information about you
- Describe how and where you may file a privacy-related complaint

If, at any time, you have questions about information in this Notice or about our privacy policies, procedures, or practices, you can contact the local Catholic Charities Regional Director or our Privacy Officer, Gary Skinner at (919) 821-9761.

CATHOLIC CHARITIES MAY USE AND DISCLOSE MEDICAL AND MENTAL HEALTH INFORMATION ABOUT YOU IN SEVERAL CIRCUMSTANCES

This section of our Notice explains how we may use and disclose medical and mental health information about you in order to provide health care, obtain payment for that health care, and operate our agency

efficiently. It also mentions other circumstances in which we may disclose medical and mental health information about you.

1. Treatment

Catholic Charities may disclose medical and mental health information about you to provide, coordinate or manage your health or mental health care and related services. This may include communicating with other psychotherapists, clinicians in training, or clinical supervisors regarding your treatment and coordination of care.

2. Payment

Catholic Charities may use and disclose medical and mental health information about you to obtain payment for health care services that you receive. That means that, within the agency, we may use medical and mental health information about you to arrange for payment, such as billing your insurance company. In some instances, we may disclose medical and mental health information about you to an insurance plan before you receive certain health care services. For example, we may want to know whether the insurance plan will pay for a particular service.

3. Quality Assurance

Catholic Charities may disclose medical and mental health information about you while performing quality assurance reviews of our clinical program. These reviews are conducted by agency staff only; results are utilized to allow us to improve the quality of care we provide you and to enhance our programs in the future.

4. Minors

If the client is a minor (under 18 years of age) we may disclose medical and mental health information about the minor to a parent, guardian, or other person responsible for the minor. Parents and guardians have the right to access the minor's file for the purpose of review, correction or addition.

5. Disclosures required by law

Catholic Charities will disclose medical and mental health information about you whenever we are required by law to do so:

- Duty to Warn and Protect: When a client discloses intentions or a plan to harm another person, we are required to warn the intended victim and report this information to legal authorities. In cases in which the client discloses or implies a plan for suicide, we are required to notify legal authorities and make reasonable attempts to notify the family of the client.
- Abuse of Children and Vulnerable Adults: If a client states or suggests that they are abusing a child (or vulnerable adult) or has recently abused a child (or vulnerable adult), or a child (or vulnerable adult) is in danger of abuse, we are required to report this information to the North Carolina Department of Social Services.
- Court Proceedings: We may disclose medical and mental health information about you to a court or an officer of the court (e.g. we would disclose medical information about you to a court if a judge orders us to do so).
- Law Enforcement: Law enforcement reasons may include (1) legal courses of action required by law, (2) limited information requests for identification and location purposes, (3) pertaining to victims of a crime, (4) suspicion that death has occurred as a result of criminal conduct, and (5) in the event that a crime occurs on the site of the practice.
- Worker's Compensation: We may disclose medical and mental health information about you in order to comply with workers' compensation laws.

- Certain government functions: We may disclose medical and mental health information about you for certain government functions, including but not limited to military and veterans' activities and national security and intelligence activities. We may also use or disclose medical and mental health information about you to a correctional institution in some circumstances.

6. Authorization

Other than the disclosures described above (#1-5), Catholic Charities will not disclose medical and mental health information about you without the signed authorization of you or your parent or guardian. In some instances, we may wish to use or disclose medical and mental health information about you and we may contact you to ask you to sign an authorization form. In other instances, you may contact us to ask us to disclose medical and mental health information and we will ask you to sign an authorization form. If you sign a written authorization allowing us to disclose medical and mental health information about you, you may later revoke your authorization in writing. If you would like to revoke your authorization, we will follow your instructions except to the extent that we have already relied upon your authorization and taken some action.

<p style="text-align: center;">YOU HAVE SEVERAL RIGHTS WITH RESPECT TO MEDICAL AND MENTAL HEALTH INFORMATION ABOUT YOU</p>

You have several rights with respect to medical information about you. This section of the Notice will briefly mention each of these rights.

1. Right to a copy of this Notice

You have a right to have a copy of the Catholic Charities Notice of Privacy practices at any time. In addition, a copy of this Notice will always be posted clearly in our offices. If you would like to have a copy of this Notice, ask the receptionist or Regional Director for a copy, or contact our Privacy Officer.

2. Right of access to inspect and copy.

You may inspect and receive a copy of your medical and mental health information used to make decisions about you. We may charge you for copies. If you would like to inspect or receive a copy of your medical and mental health information about you, you must provide us with a request in writing.

Catholic Charities may deny your request in certain circumstances. If we deny your request, we will explain our reason for doing so in writing. We will also inform you in writing if you have the right to have our decision reviewed by another person. We may be able to provide you with a summary or explanation of the information. Contact the local Regional Director or our Privacy Officer for more information on these services and any possible additional fees.

3. Right to have medical and mental health information amended

You have the right to have us amend medical and mental health information about you that we maintain in our records. We will turn down your request if we did not create the information. If you believe that we have information that is either inaccurate or incomplete, we may amend the information to indicate the problem and notify others who have copies of the inaccurate or incomplete information. If you would like us to amend information, you must provide us with a request in writing and explain why you would like us to amend the information.

Catholic Charities may deny your request in certain circumstances. If we deny your request, we will explain our reason for doing so in writing. You will have the opportunity to send us a statement

explaining why you disagree with our decision to deny your amendment request and we will share your statement whenever we disclose the information in the future.

4. Right to an accounting of disclosures we have made

You have a right to an accounting of disclosures we have for the previous six (6) years. The accounting will not include several types of disclosures, including disclosures for treatment, payment or mental health care operations. It will also not include disclosures made prior to April 14, 2003. If you would like to receive an accounting, you may send us a letter requesting an accounting to the Regional Office.

5. Right to request restrictions on uses and disclosures

You have the right to request that we limit the use and disclosure of medical and mental health information about you for treatment, payment and health care operations. We are not required to agree to your request. If we do agree, there still may be circumstances such as those described above in which you cannot object. You may cancel the restrictions at any time. In addition, we may cancel a restriction at any time as long as we notify you of the cancellation and continue to apply the restriction to information collected before the cancellation.

6. Right to request an alternative method of contact

You have the right to request to be contacted at a different location or by a different method. For example, you may prefer to have all written information mailed to your work address rather than your home address. We will agree to any reasonable request for alternative methods of contact. If you would like to request an alternative method of contact, inform your counselor, the receptionist or Regional Director.

YOU MAY FILE A COMPLAINT ABOUT OUR PRIVACY PRACTICES

If you believe that your privacy rights have been violated or if you are dissatisfied with our privacy policies or procedures, you may file a complaint to the person below:

Gary Skinner, HIPAA Officer
Catholic Charities of the Diocese of Raleigh
715 Nazareth St.
Raleigh, North Carolina 27606

You may also send a written complaint to the Secretary, Department of Health and Human Services.

IF YOU FILE A COMPLAINT, WE WILL NOT TAKE ANY ACTION AGAINST YOU OR CHANGE OUR TREATMENT OF YOU IN ANY WAY.