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Health Insurance Portability and accountability Act (HIPAA) notice

Confidentiality and Data Privacy Policy

This notice describes how your health information may be used and disclosed and how you can access this information. Please review this and all other policies carefully. We are committed to protecting our clients' privacy and confidentiality. Health Insurance Portability and Accountability Act (HIPAA) is a state and federal law, the went into effect on April 14, 2003 and requires us to inform you of this policy. HIPAA requires us to continue maintaining your privacy, to give you this notice, and to follow the terms of this notice. The law permits us to use or disclose your health information to those involved in your treatment. We may use or disclose your health information to obtain payment of the services you receive (e.g. information as requested by your health insurance plan). We may use or disclose your health information for our normal healthcare operations, and with our business associates, such as a billing service, or administrative staff, should we someday hire such a role. To protect your privacy and confidentiality all potential business associates are required to protect your privacy.

We may consult with other licensed professionals in counseling as necessary, protecting your confidential information, to gain guidance for your treatment. We will use your information to contact you; to call and remind you about your appointments; and potentially we may leave brief information on your answering machine, or with the person who answers the phone. If you have an emergency contact listed in your chart, we may disclose your health information in an emergency situation, only as needed for your care. Finally, we may release some or all of your health information when required by law. If this practice is sold, your information will become the property of the new owner(s). Except as described above, this practice will not use or disclose your health information without your prior written authorization.

You may request in writing we not use or disclose your health information as described above. We will let you know if we can fulfill your request. You have the right to know of any uses or disclosures we make with your health information beyond the above normal uses. You have the right to transfer copies of your health information to another practice. You have the right to see or receive a copy of any of your health information and can make the request by filling out a release of information. You have the right to request an amendment or change to your health information. All request to view/send records or to make changes must be requested in writing. If you wish to include a statement in your file, please give it to us in writing. We may or may not make the changes you request, but will be happy to include your statement in your file. If we agree to an amendment or change, we will not remove or alter earlier documents, but will add new information. You have the right to receive a copy of this notice. If we change any of the details of this notice, we will notify you of the changes in writing. You may file a complaint with the Department of Health and Human Services, 200 Independence Avenue, S.W, Room 509F Washington, D.C. 20201. However, before filing a complaint, or for more information or assistance regarding your health information privacy, please contact us directly at 651-583-5565.

The State of Minnesota laws impose some limitations to your rights to confidentiality. The following is a list of situations in which you may lose your right to confidentiality:

- If you make a specific threat to harm yourself or someone else (and the risk of danger is deemed imminent), your therapist must take appropriate steps to protect you or warn the appropriate parties.
- If your therapist suspects you have physically or sexually abused or neglected a child or vulnerable adult, your therapist must make a report to the proper authorities. This includes



some cases of domestic abuse when a child is exposed to weaponry or is physically threatened and/or used as a weapon.

- If you are pregnant and using a controlled substance such as heroin, cocaine, phencyclidine, methamphetamine, or their derivatives.
- When there is a court order to release your records to the legal authorities.
- If an investigation or disciplinary proceeding is mandated by the licensing board and your information is involved in those proceedings.

If you are a minor/depend, you have a limited right to privacy in that your parents may have access to your records. However, if the therapist believes sharing this information will be harmful to you, confidentiality will be maintained to the limits of the law.

Release of Records

The laws and standards of this profession require that we keep treatment records. You are entitled to examine and/or receive a copy of your records if you request it in writing. In order to see your records, you and your therapist will need to discuss the contents together. Because these are professional records, they can be misinterpreted and/or be upsetting to people who are not mental health professionals. If you prefer not to discuss them with your therapist and your therapist believes seeing them could be emotionally damaging, they will send them to a mental health professional of your choice.

All information regarding patients is considered strictly confidential and will not be given out to other entities or individuals without your written consent. In the event of a request for transfer of records, the records will be forwarded upon completion of a consent form and a payment fee based on the current legal maximums allowed by the Department of Health.

My signature below indicates I have received and understand the Notice of Privacy Practices (HIPAA). If I have questions, the information has been explained and/or summarized for me.

Signature (Client or Legal Guardian if client is under 18)

Date