



NOTICE OF PRIVACY PRACTICE

THIS NOTICE DESCRIBES HOW MENTAL HEALTH, DRUG AND ALCOHOL RELATED INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

General Information

Information regarding your health care, including payment for health care, is protected by two federal laws: the Health Insurance Portability and Accountability Act ("HIPAA"), 42 U.S.C. § 1320 *et seq.*, 45 C.F.R. Parts 160 & 164, and the Confidentiality Law, 42 U.S.C. § 290dd-2, 42 C.F.R. Part 2. Under these laws, Volunteers of American Northern Rockies may not say to a person outside that you attend the program, nor may Volunteers of America Northern Rockies disclose any information identifying you as an alcohol or drug abuser, or disclose any other protected information except as permitted by federal law.

Volunteers of American Northern Rockies must obtain your written consent before we can disclose information about you for payment purposes. For example, Volunteers of America Northern Rockies must obtain your written consent before we can disclose information to your health insurer in order to be paid for services. Generally, you must also sign a written consent before Volunteers of America Northern Rockies can share information for treatment purposes or for health care operations. However, federal law permits Volunteers of America Northern Rockies to disclose information without your written permission:

1. Pursuant to an agreement with a business associate;
2. For research, audit or evaluations;
3. To report a crime committed on Volunteers of America Northern Rockies premises or against Volunteers of America Northern Rockies personnel;
4. To medical personnel in a medical emergency;
5. To appropriate authorities to report suspected child abuse or neglect;
6. As allowed by a court order;
7. Other examples can be found in the client handbook.

For example, Volunteers of America Northern Rockies can disclose information without your consent to obtain legal or financial services, or to another medical facility to provide health care to you, as long as there is a business associate agreement in place.

Before Volunteers of American Northern Rockies can use or disclose any information about your health in a manner which is not described above, it must first obtain your specific written consent allowing it to make the disclosure. Any such written consent may be revoked by you in writing.

Your Rights

Under HIPAA, you have the right to request restrictions on certain uses and disclosures of your health information. Volunteers of America Northern Rockies is not required to agree to any restrictions you request, but if it does agree then it is bound by that agreement and may not use or disclose any information which you have restricted except as necessary in a medical emergency. You have the right to request that we communicate with

you by alternative means or at an alternative location. Volunteers of America Northern Rockies will accommodate such requests that are reasonable and will not request an explanation from you. Under HIPAA you also have the right to inspect and copy your own health information maintained by Volunteers of America Northern Rockies except to the extent that the information contains

Psychotherapy notes or information compiled for use in a civil, criminal or administrative proceeding or in other limited circumstances. Under HIPAA you also have the right, with some exceptions, to amend health care information maintained in Volunteers of America Northern Rockies records, and to request and receive an accounting of disclosures of your health related information made by Volunteers of America Northern Rockies during the six years prior to your request. Also, at your request, you may choose not to have your treatment information disclosed to your health insurance carrier if you have paid for services out-of-pocket, unless the disclosure is required by law. You also have the right to receive a paper copy of this notice.

Volunteers of America Northern Rockies Duties

Volunteers of America Northern Rockies is required by law to maintain the privacy of your health information and to provide you with notice of its' legal duties and privacy practices with respect to your health information. Volunteers of America Northern Rockies are required by law to abide by the terms of this notice. Volunteers of America Northern Rockies reserves the right to change the terms of this notice and to make new notice provisions effective for all protected health information it maintains. Further, Volunteers of America Northern Rockies is also required to notify you if there has been a breach of your confidential information after a risk assessment has been performed and are required to mitigate these breaches.

Complaints and Reporting Violations

You may complain to Volunteers of America Northern Rockies and the Secretary of the United States Department of Health and Human Services if you believe that your privacy rights have been violated under HIPAA. You will not be retaliated against for filing such a complaint.

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.

Contact

For further information, contact: Kelly Buckingham, Privacy Officer
1876 S Sheridan Avenue
Sheridan, WY 82801
(307) 672.0475

Effective Date: March 15, 2016

Acknowledgement

You have received a copy of this notice in your client handbook. Additionally, the most current revision of this notice is available to you in the most current client handbook.

Additional rights can be found at www.aspe.hhs.gov or by contacting the privacy officer.