

CONFIDENTIALITY NOTICE

THIS NOTICE DESCRIBES HOW MEDICAL AND 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 treatment and care, including payment for care, is protected by two federal laws: The Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), 42 U.S.C, § 130d 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, the Staten Island YMCA Counseling Service may not say to a person outside the Staten Island YMCA Counseling Service that you attend the program, nor may the Staten Island YMCA Counseling Service disclose any information identifying you as an alcohol or drug treatment client, or disclose any other protected information except as permitted by federal law.

The Staten Island YMCA Counseling Service must obtain your written consent before it can disclose information about you for payment purposes. For example, the Staten Island YMCA Counseling Service must obtain your written consent before it can disclose information to your health insurer, in order to be paid for services. Generally, you must also sign a written consent before the Staten Island YMCA Counseling Service can share information for treatment purposes or for health care operations. However, federal law permits the Staten Island YMCA Counseling Service to disclose information *without* your written permission:

- 1. To program staff for the purposes of providing treatment and maintaining the clinical records;
- 2. Pursuant to an agreement with a qualified service organization/business associate (e.g. clinical laboratories, pharmacy, record storage services, billing services);
- 3. For research, audit or evaluations (e.g. State licensing review, accreditation, program data reporting as required by the State and/or Federal government);
- 4. To report a crime committed on Staten Island YMCA Counseling Services premises or against YMCA Counseling Service personnel;
- 5. To medical personnel in a medical/psychiatric emergency;
- 6. To appropriate authorities to report suspected child abuse or neglect;
- 7. To report certain infectious illnesses as required by state law;
- 8. As allowed by a court order

One of the qualified service organization/business associates we work with is a third party vendor, Stericycle. To assist you on your recovery journey, our program utilizes Stericycle's Patient Prompt, to provide you with reminders for all types of your individual sessions. As a result, you will receive reminders via email, phone and/or text messaging. The YMCA uses diligent efforts to limit the personal information contained in these reminder messages however, these text & email messaging communications from the YMCA for appointment reminders are not encrypted, creating the risk of interception by unauthorized recipients. You have the right to opt out of receiving these reminders.

Before the Staten Island YMCA Counseling Service 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. (NOTE: Revoking a consent to disclose information to a court, probation department, parole office, etc. may violate an agreement that you have with that organization. Such a violation may result in legal consequences for you.)

YOUR RIGHTS

• Under HIPAA you have the right to request restrictions on certain uses and disclosures of your health and treatment information. The Staten Island YMCA Counseling Service 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 (e.g. another address). The Staten Island YMCA Counseling Service will accommodate such requests that are reasonable and will not request an explanation from you.
- Under HIPAA, you also have the right to an electronic copy of your records and the right to inspect and copy
 your own health information maintained by the Staten Island YMCA Counseling Service, 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 Counseling Service records, and to request and receive an accounting of disclosures of your health-related information made by the YMCA Counseling Service during the six years prior to your request.
- To make any of the above requests, you must fill out the appropriate form that will be provided by the program.
- If your request to any of the above is denied, you have the right to request a review of the denial by the program Administrator.
- You have the right to receive a paper copy of this notice.

THE USE OF YOUR INFORMATION AT THE PROGRAM

To provide you with the best care, the program will use your health and treatment information the following ways:

- Communication among program staff (including students or other interns) for the purposes of treatment needs, treatment planning, progress reporting and review, staff supervision, incident reporting, medication administration, billing operations, medical record maintenance, discharge planning, and other treatment related processes.
- Communication with business Associates such as clinical laboratories (blood work, urinalysis), food service (special dietary needs), agencies that provide on-site services (lectures, group therapy) long term record storage.
- Reporting data to the NYS OASAS Client Data system.

STATEN ISLAND YMCA COUNSELING SERVICE'S DUTIES

The Staten Island YMCA Counseling Service 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. The Staten Island YMCA Counseling Service is required by law to abide by the terms of this notice. The Staten Island YMCA Counseling Service reserves the right to change the terms of this notice and to make new notice provisions effective for all protected health information it maintains. The program will provide current clients with an updated notice and will provide affected former clients with new notices when substantive changes are made in the notice.

COMPLAINTS AND REPORTING VIOLATIONS

Clients have the right to make a complaint about the Confidentiality and Privacy of their Health Information. The client may complete a Privacy Complaint form and submit the form to Jacqueline Filis, Executive Director, YMCA Counseling Service, 3911 Richmond Avenue, Staten Island, NY 10312, (718) 948-3232. The client may also register a complaint with:

or

Office for Civil Rights
U.S. Dept. of Health and Human Services
Jacob Javits Federal Building
26 Federal Plaza – Suite 3313
New York, NY 10278
Phone (212) 264-3313
FAX (212) 264-3039
TDD (212) 264-2355
Hotline 1 (800) 368-1019

U.S. Attorney
271 Cadman Plaza East
Brooklyn, NY 11201
Phone (718) 254-7000
Fax (718) 254-7508

	crime. Suspected violations of the Confidentiality law may
be reported to the United States Attorney in the distric	tt where the violation occurs.
CONTACT	
For further information, contact Jacqueline Filis, Execu 3911 Richmond Avenue, Staten Island, NY 10312, (718	
3311 Meliniona Avenae, Statem Island, NY 10312, (710	, 340 3232.
EFFECTIVE DATE	
This notice is effective as of January 1, 2018.	
ACKNOWLEDGEMENT	
I hereby acknowledge that I received a copy of this not	tice.
Date	Signature of Client
	Signature of Parent or Guardian
	(If Applicable)