

## HOW HEALTH INFORMATION ABOUT YOU MAY BE USED, DISCLOSED, AND ACCESSED

### Types of Information

Identifying Information includes nonclinical information such as your date of birth, sex, address, phone number, insurance information, and marital status.

Clinical Information includes my progress notes, evaluation materials, and forms that you have completed for me to aid in your treatment.

Insurance Information includes all information required by your insurance company and associated managed care contracts to gain payment for my services. Companies vary in their request for information. All companies ask for identifying information and employer name, Social Security number, policy number (s), diagnosis, treatment code, setting of treatment and specific charges for each treatment. Managed care companies often ask for treatment goals, treatment progress, rationale for the treatment, and the patient's motivation and assessment of progress. They also ask for information about medical or substance abuse issues that may effect treatment outcomes. Insurance companies and managed care companies store this information but must protect the information from unauthorized access.

### Your Privacy Rights

Federal and state law requires me to maintain the privacy of your health information and that you be informed of your rights. Your rights may change at any time, provided that the law permits the change. You will be notified of any change in my policy.

- No information will be released without your permission except in instances detailed below. In most cases, I will require written permission before I release information to another person. Couples seen together must each sign permission for me to release clinical information from sessions we have together.
- Identifying and clinical information can be released without your permission if you are a danger to yourself or another person. Child abuse must also be reported to the Dept. of Human Services.
- Identifying and clinical information can be released in certain situations in response to an order of a court.
- I will disclose your health information to obtain payment for the services only with your authorization.
- I may disclose healthcare information through telephone messages or letters used to clarify appointments or assess treatment progress.

### Accessing Your Health Information

- You have the right to look at or get copies of that portion of your record that clarifies when we met, what the procedure was and what the charges were. You may obtain copies of clinical information if I believe that no harm will come to you from this disclosure. You will be charged a fee for the cost of copying your records.
- You may amend your records if you feel that there is a mistake.
- You have the right to set limits on the disclosure of information and you may change these limits.
- You may also set limits on how I communicate with you-for instance not calling your home or not sending information through the mail.
- You have the right to request an accounting of certain disclosures I have made, if any, for your protected health information.

### Complaints

If you feel that your privacy rights have been violated, please let me know immediately. You also have the right to complain to the Federal Government by writing to:

U.S. Department of Health and Human Services  
Atlanta Federal Center, Suite 3B70  
61 Forsyth Street, S.W.  
Atlanta, GA 30303-8909

Voice Phone (404)562-7886 FAX (404)562-7881 TDD (404)331-2867