

NOTICE OF PRIVACY PRACTICES

AROOSTOOK MENTAL HEALTH SERVICES, INC. (dba AMHC)

This organization is committed to preserving the privacy and confidentiality of your health information, including any information regarding behavioral health treatment you may have received. We are required by law, including federal regulations, to provide you with this notice of our legal duties, your rights, and our privacy practices with respect to using and disclosing your health care information that is created or retained by this organization.

SUMMARY OF RIGHTS AND OBLIGATIONS CONCERNING HEALTH INFORMATION

Each time you receive treatment or services from us, we make a record of your visit. Typically, this record contains the reason for the services or treatment, any symptoms or complaints, information regarding any examination, findings, observations, diagnoses and treatment, and a plan for future care or recommendations. We have an ethical and legal obligation to protect the privacy of your health information, and we will only use or disclose this information in limited circumstances. In general, we may use and disclose your health information to:

- plan your care and treatment;
- provide treatment by us or others;
- communicate with other providers such as referring physicians;
- receive payment from you, your health plan, or your health insurer;
- make quality assessments and work to improve the care we render and the outcomes we achieve, known as health care operations;
- make you aware of services and treatments that may be of interest to you; and,
- comply with state and federal laws that require us to disclose your health information.

We may also use or disclose your health information where you have authorized us to do so.

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You have certain rights to your health information. You have the right to:

- ensure the accuracy of your health record;
- request confidential communications between you and your provider and request limits on the use and disclosure of your health information; and
- request an accounting of certain uses and disclosures of health information we have made about you.

We are required to:

- maintain the privacy of your health information;
- provide you with notice, such as this *Notice of Privacy Practices*, as to our legal duties and privacy practices with respect to information we collect and maintain about you;
- abide by the terms of our most current *Notice of Privacy Practices*;
- notify you if we are unable to agree to a requested restriction; and
- accommodate reasonable requests you may have to communicate health information by alternative means or at alternative locations.

We reserve the right to change our practices and to make the new provisions effective for all your health information that we maintain.

Should our information practices change, a revised *Notice of Privacy Practices* will be available upon request. If there is a material change, a revised Notice of Privacy Practices will be distributed to the extent required by law. We will not use or disclose your health information without your authorization, except as described in our most current *Notice of Privacy Practices*.

AUTHORIZATION FOR OTHER USES OF HEALTH CARE INFORMATION

Uses of health care information not covered by our most current *Notice of Privacy Practices* or the laws that apply to us will be made only with your written authorization. If you provide us with authorization to use or disclose health care information about you, you may revoke that authorization, in writing, at any time. If you revoke your authorization, we will no longer use or disclose health care information about you for the reasons covered by your written authorization, except to the extent that we have already taken action in reliance on your authorization or, if the authorization was obtained as a condition of obtaining insurance coverage and the insurer has the right to contest a claim or the insurance coverage itself. We are unable to take back any disclosures we have already made with your authorization, and we are required to retain our records of the care that we provided to you.

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HEALTHINFONET

AMHC belongs to a state group of healthcare organizations called HealthInfoNet. This group works with health care providers to share electronic health information regarding your health care. Your *medical* information may be disclosed by other HealthInfoNet participating health care providers to AMHC, unless you have executed an opt-out form with HealthInfoNet. However, your behavioral health information cannot be made available by AMHC to the HealthInfoNet system, without your specific execution of an **Opt-In** form. If you submit an Opt-In form, the information in your electronic health record will be made available to health care providers outside of AMHC who have access to HealthInfoNet. If you would like further information about this, and how you can Opt-In to the HealthInfoNet system for the sharing of your behavioral health information with your other health care providers, let your provider know and we will provide you with the form, or you can access it at the HealthInfoNet website at <http://www.hinfonyet.org>.

COMPLAINTS

If you believe your privacy rights have been violated by AMHC, you may file a complaint with us or with the Secretary of the U.S. Department of Health and Human Services, 200 Independence Ave, S.W., Washington, D.C. 20201. To file a complaint with us, contact our privacy officer at the address listed below. All complaints must be submitted in writing and should be submitted within 180 days of when you knew or should have known that the alleged violation occurred. See the Office for Civil Rights website, www.hhs.gov/ocr/hipaa/ for more information. You will not be penalized by AMHC in any way for filing a complaint.

If your complaint involves a breach of confidentiality regarding substance abuse treatment, you may also contact the State of Maine Substance Abuse and Mental Health Services office, 41 Anthony Ave. #11 State House Station, Augusta, ME 04333-0011, 207/287-2595.

If you have any questions about this Notice, or wish to report directly to AMHC any complaint or concern you may have, please contact our privacy officer:

Jennette Hitchcock, LCSW
Chief Operations Officer
P.O. Box 1018
Caribou, ME 04736
(207) 498-6431

Effective May 1, 2015