

Notice of Health Information Privacy Policies and Practices

This notice describes how psychological and medical information about you/your child may be used and disclosed and how you can get access to the information. This notice is required by law to inform you about your rights regarding your/your child's health information, how McClure, Mallory, Baron & Ross may use or disclose your/your child's health information, and how your/your child's health information will be protected. Please review it carefully, and feel free to ask questions about the information.

The information ("protected health information") you provide during your visit(s) to McClure, Mallory, Baron & Ross for purposes of educational planning or psychoeducational evaluation serves as a:

1. Basis for planning your/your child's care and treatment ("treatment")
2. Legal documentation of the care you receive
3. Means of communicating among the health professional who contribute to your care ("health care operations")
4. Means to verify that services you/your child received were appropriately billed ("payment")

CLIENT'S RIGHTS:

1. Receive a Copy of this Notice – You will receive a copy of this notice by mail or at your first visit after its publication. You have the right to obtain a paper copy of the notice upon request, even if you have agreed to receive the notice electronically.
2. Access your health information – You have the right to inspect or obtain a copy (or both) of your health information in McClure, Mallory, Baron & Ross's mental health and billing records used to make decisions about you for as long as the information is maintained in the record. Access to information may be denied if it is believed that disclosure would endanger a person's life or physical safety. Upon request, the details of the request and denial process will be explained.
3. Request Confidential Communications – You have the right to request confidential communications about your health information be made in a specific manner. (e.g., at a certain address or phone number). All reasonable efforts will be made to comply with your request.
4. Request Restrictions – You have the right to request restrictions on certain uses and disclosures of your/your child's protected health information. McClure, Mallory, Baron & Ross is not required to agree with your request if it is believed that it would interfere with the ability to treat you/your child or collect payment for services.
5. Amend Your Record – You have the right to request an amendment of your health information for as long as the information is maintained in our record. Requests will be considered, but McClure, Mallory, Baron & Ross is not obligated to comply with your request. Upon request, the details of the amendment process will be explained.
6. Receive an Accounting of Disclosures – You generally have the right to receive an accounting of disclosures of your health information. Upon request, the details of the details of the accounting process will be explained.

Except for the purposes of your treatment, collecting payment for services, performing necessary business functions, or when otherwise permitted or required by law*, McClure, Mallory, Baron & Ross will not use or disclose your health information without your authorization. You have the right to revoke or modify such authorization at any time, which would limit future disclosures. A revocation would not affect any disclosure McClure, Mallory, Baron & Ross already made with your permission and would become effective once it is received by McClure, Mallory, Baron & Ross.

*There are several situations under which psychologists are required by law to reveal information without your permission. These situations include:

1. Threats to harm another person
2. Threats to harm self
3. Child abuse or elder abuse
4. Court-ordered psychotherapy or evaluations
5. Court subpoena for records
6. Health oversight activities by an authorized government agency
7. Worker's compensation claim

PSYCHOLOGIST'S RESPONSIBILITIES:

- Maintain the privacy of your health information
- Provide you with this notice of legal duties and privacy practices with respect to your health information.
- Reserve the right to change or revise the privacy policies and practices described in this notice. In that event, a revised notice will be made available to clients in person or by mail.

If you have further questions about the law that is the basis for these rights and procedures, you are concerned that your privacy rights have been violated, or you disagree with a decision that has been made about access to your records, you may contact U.S. Department of Health and Human Services, Office of Civil Rights, Huber H. Humphrey Building, 200 Independence Avenue, S.W., Room 509 HHH Building, Washington, D.C. 20201. The care you/your child receive will in no way be impacted by the filing of a complaint.

ACKNOWLEDGMENT OF RECEIPT

This policy is in effect as of April 25, 2003. I acknowledge receipt of the Notice of Health Information Privacy Policies and Practices of McClure, Mallory, Baron & Ross.

Name of Client

Name of Parent/Legal Guardian/Client

Signature of Parent/Legal Guardian/Client

Date