

*Bear River Mental
Health Services, Inc.*

Notice of Privacy Practices

Effective: April 14, 2003

*This notice describes how
medical information about
you may be used and dis-
closed and how you can
get access to this infor-
mation.*

*Please review it
carefully.*

Sharing Your Health Information

There are some situations in which we are permitted or required to share health information without your written permission. These situations include:

- For public health purposes as in reporting communicable diseases such as AIDS, Hepatitis, or sexually transmitted diseases.
- To protect victims of abuse, neglect, or domestic violence.
- For health oversight activities such as health care investigations, audits, and inspections.
- For judicial proceedings such as in response to a court order or subpoena.
- When requested for law enforcement purposes such as reporting a crime.
- To coroners, medical examiners, and funeral directors when necessary by law for the performance of their duties.
- For research purposes if approved by an Institutional Review Board or a privacy board.
- To prevent a serious threat to public health and safety, which may include crisis interventions.
- For specialized government functions such as intelligence and national security activities.
- For workers' compensation programs as necessary for work-related injuries.
- Other disclosures than those listed will be made only with your written authorization, which may be revoked at any time.

Other Disclosures We May Provide

We may also use your health information to:

- Inform you about treatment alternatives.
- Tell you about health services and products that may benefit you.
- Share information with family or friends involved in your care, or payment for your care, if we obtain your oral agreement.
- Share information with third parties who assist us with treatment, payment, and health care operations, such as hospitals, doctors, and other health care providers.
- Remind you of an appointment.
- Contact you for fundraising purposes.

Additional Information

If you would like further information about your privacy rights, are concerned that your privacy rights have been violated, or disagree with a decision that was made about access to your health information, you may contact the BRMH Privacy Official at (435) 752-0750. A privacy complaint form or other privacy rights request forms may be obtained at the reception counter of our main offices or you may contact our Privacy Official for further assistance.

We will investigate all complaints and will not retaliate against you for filing a complaint. You may also file a written complaint with the Secretary of the U.S. Department of Health and Human Services.

**BEAR RIVER MENTAL HEALTH
SERVICES, INC.**

Privacy Promise

Bear River Mental Health (BRMH) understands that your health care information is personal. Protecting the privacy of this information is important to us, therefore we follow strict federal and state laws related to confidentiality, and take reasonable steps to limit our use and disclosure of this information to the minimum necessary.

How We Use Your Health Information

When you receive services from BRMH, we may use your health information to provide treatment, to bill for services, and to conduct our normal business activities known as health care operations. Examples of how we use your information may include:

Treatment — We keep records of the mental health services you receive. Our mental health therapists, practitioners, and medical professionals use these records to provide proper assessment, planning, coordination, and delivery of mental health treatment and related services that are determined necessary to meet your individual needs.

Payment — We also keep billing records that include payment information and documentation of the services you receive. Your information may be used to obtain payment from you, your insurance company, or other third parties for the services you have received.

Health Care Operations - We use health information to improve the quality of our services, train our staff, and conduct health care related business. For example, we may use your health information to evaluate the quality of the treatment services provided by the mental health professionals we employ.

Our Privacy Responsibilities

BRMH is required by law to:

- Maintain the privacy of your health information.
- Provide this notice that describes the ways we may use and share your health information.
- Follow the terms of our notice currently in effect.

We reserve the right to make changes to this notice at any time and make the new privacy practices effective for all information we maintain. Current notices will be posted and available at all BRMH facilities.

Your Individual Rights

You have the right to:

- To request in writing, restrictions on how we use and share your health information. We will consider all requests for restrictions carefully but we are not required to agree to a restriction.
- To request that we communicate with you by

some other means or at another location, such as an alternate telephone number or address.

- To request in writing, to inspect and copy your health information. However, we may deny you access to information obtained from someone other than a health care provider under a promise of confidentiality, in some situations required by law, or in situations which we believe could endanger you or someone else. In some cases, if you are denied access, you may request to have the denial reviewed. If copies of information are provided, we may charge a fee for supplies and labor.
- To request in writing, corrections or amendments to your health information, however we are not required to amend a record that we believe is accurate and complete.
- To request in writing, an accounting of certain disclosures that we make after April 14, 2003. The accounting does not include information shared for purposes of treatment, payment, our health care operations, or information shared with your consent or authorization. The first accounting is free but a fee may apply if more than one request is made in a 12-month period.

Request forms are available at the reception counter at our main offices, or you can contact the Center's Privacy Official at 435-752-0750.