# ROVOCATES

# **Notice of Privacy Practices**

# **Effective 3/1/2019**

This notice describes how Advocates may use/disclose your Protected Health Information (PHI) and how you can gain access to this information.

Please review this notice carefully.

# Advocates' commitment to you

At Advocates, we understand that information about you and your services is personal. We are committed to protecting your privacy and sharing information only with those who need to know and are authorized to see the information to assure quality services for you. This notice describes how Advocates uses and discloses protected health information (PHI) about you for services, payment and healthcare operations. It also describes your rights to access and control your PHI and Advocates' responsibilities to maintain your PHI. PHI is information that may identify you and relates to your past, present or future physical and/or mental health condition, services and payment for such services. Sometimes this information is also referred to as clinical information. In this notice, protected information will be referred to as PHI.

# Who will follow this notice?

All Advocates' employees, volunteers, contractors and business associates that provide services on behalf of Advocates who are authorized to access your records are subject to the terms of this notice.

# What information is protected?

All information we create or maintain that relates to you and your healthcare and/or services, including your name, address, birth date, social security number, Medicaid number, medical information, person-centered service plan, staff action plan, safeguards and other information (such as photographs and other images that could identify you in connection with your PHI) is protected.

# **Your PHI Rights**

You and/or your designee, have the following rights concerning your PHI. Your designee, depending on your circumstances and in accordance with state law, may be your legal guardian, healthcare agent or designated legal representative who may include a family member such as a spouse, domestic partner, parent, adult child or adult sibling. The right to:

- See or inspect your PHI and obtain a copy
- Ask Advocates to change or amend PHI that you believe is incorrect or incomplete. We may deny your request if the record was not created by Advocates or if after reviewing your request, we believe the record is accurate and complete.
- Request a list of the disclosures Advocates has made of your PHI for up to 6 years prior to the date of your request. The list, however, does not include disclosures made for services, payment and healthcare operations or disclosures made to you or made to others with your permission. For example; disclosures made to law enforcement in response to a court order or subpoena.
- Request that Advocates communicates with you in a way that will keep your information confidential
- Request a restriction on uses or disclosures of your PHI related to services, payment, healthcare operations
  and disclosures to involved family. Advocates, however, is not required to agree to your request unless you
  have paid for your services in full, with your own money, and are requesting restrictions on information

pertaining only to those services for payment or healthcare operations and the disclosure is not required by law

- Receive a paper copy of this notice. You may obtain additional copies from Advocates' staff or by accessing
  our website at <a href="https://www.advocatesincorporated.org">www.advocatesincorporated.org</a> at any time.
- Be notified following a breach of unsecured PHI. When your PHI is disclosed to unauthorized persons and can be read by them, we must notify you.

To request access to your PHI or to request any of the rights listed above, submit your written request to the Advocates Compliance Officer at 300 South Manlius Street, Fayetteville, NY 13066.

# Advocates is required to

- Keep and maintain the privacy of your PHI in accordance with federal and state laws.
- Give you this notice of our legal duties/practices concerning the PHI we maintain about you.
- Follow the rules in this notice. Advocates will only use or disclose PHI about you with your permission or for one of the reasons explained in this notice.
- Tell you if we make changes to our privacy practices in the future. If significant changes are made, Advocates
  will distribute a revised Notice of Privacy Practices to you and post the revised notice on our website at
  www.advocatesincorporated.org.

### **How Advocates uses and discloses PHI**

Advocates may use and disclose PHI without your permission for the purposes described below:

- **Services/Treatment;** Advocates will use your PHI to provide you with services. We may disclose PHI to doctors, nurses, psychologists, social workers, intellectual/developmental disability service professionals, direct support professionals and other Advocates' employees, volunteers, contractors and business entities that work with us to provide you with services. For example:
  - Staff may discuss your PHI to develop and carry out your person-centered Staff Action Plan.
  - Staff may discuss your PHI to coordinate your services in cooperation with your other service providers,
     like your Care Manager or your Day Habilitation Provider.
- **Payment;** Advocates will use your PHI to bill and collect payment from you, a third party, an insurance company, Medicare, Medicaid or other government agencies. For example:
  - o Advocates may disclose your PHI to Medicaid, Medicare and/or the NYS Department of Health to receive payment for the services you receive.
  - Advocates may disclose your PHI to Medicaid, Medicare, the NYS Department of Health, and/or the Social Security Administration to determine your eligibility for the benefits needed to pay for your services.
- Healthcare Operations; Advocates will use your PHI for administrative operations. These uses/disclosures
  are necessary to operate Advocates' services and to ensure all individuals receive high quality, personcentered services. For example:
  - We may use your PHI for quality improvement, to review our services and evaluate staff.
  - We may disclose your PHI to conduct fiscal audits and ensure program compliance.
  - We may disclose your PHI to resolve any complaints or objections you have about your services.
  - We may disclose PHI to our business associates, who need access to your information to perform administrative or professional services on Advocates' behalf. These business associates have the same responsibility as Advocates to protect the privacy of your information.

# Other uses and disclosures that do not require your permission

In addition to services/treatment, payment and healthcare operations, Advocates will use your PHI without your permission for the following reasons:

- When required to do so by federal or state law
- To governmental agencies that administer public benefits, if necessary to coordinate your services and benefits.
- For public health reasons, including prevention and control of disease, injury or disability, reporting births and deaths, reporting abuse or neglect, reporting reactions to medication or problems with products and to notify people who may have been exposed to a disease or are at risk of spreading disease,
- For health oversight activities, including audits, investigations, surveys, inspections and licensure.
- For judicial and administrative proceedings, including hearings and disputes, when ordered by a judge or presiding officer or in response to a court order or subpoena
- For law enforcement purposes; to report a possible crime, identify a missing person, suspect or witness, provide identifying data in connection to a criminal investigation and/or assist the district attorney in furtherance of a criminal investigation of individual abuse.
- To correctional institutions/officials if you are an inmate and the information is necessary to provide you with healthcare, protect your health and safety or that of others or for the safety of the facility.
- Upon your death to coroners, medical examiners and/or funeral directors.
- To organ procurement organizations in compliance with state law
- For research purposes when you have agreed to participate in the research
- To prevent or lessen a serious/imminent threat to your health and safety or to the health and safety of others.
- To authorized federal officials for intelligence and other national security activities authorized by law.

# Disclosures to certain persons if you agree or do not object

Advocates may disclose PHI, if we tell you we are going to use or disclose it and you agree or do not object, to family members/ designees who are involved in your services, or in payment for your services, if the information is relevant to their involvement, or to notify them of your condition and location and/or to disaster relief organizations that need to notify your family about your condition and location should a disaster occur.

# Authorization required for all other uses and disclosures

- For all other uses and disclosures not already described in this notice, Advocates will use or disclose PHI only
  with a written authorization signed by you or your designee that states who may receive the information,
  what information is to be shared, the purpose of the use or disclosure and an expiration date for the
  authorization.
- Written authorizations are always required for use and disclosure of psychotherapy notes (notes of counseling sessions that are kept separate from an individual's clinical record) the sale of PHI and for marketing purposes. NOTE: Advocates will never sell your PHI.
- Under NYS Law, confidential HIV-related information (information concerning whether or not you have had
  an HIV-related test or have HIV infection, HIV-related illness or AIDS or which could indicate that a person
  has been potentially exposed to HIV), cannot be disclosed except to those people you authorize in writing
  to receive it.
- If you have received alcohol or substance abuse treatment from an alcohol/substance abuse program that
  receives funds from the United States government, federal regulations further protect your treatment
  records from disclosure without your written authorization.

### Revocation

You may revoke your authorization to disclose your PHI, in writing, at any time. If you revoke your authorization, we will no longer use or disclose your PHI for the reasons stated in your authorization. We cannot, however, take back disclosures we made prior to the revocation and we must retain PHI that verifies and supports the services we have provided to you.

# Changes to this notice

Advocates reserves the right to make changes to the terms described in this notice and to make the new notice terms effective for all PHI that Advocates maintains. We will provide you with a copy of the revised notice at your next scheduled service planning meeting and post the revised notice with the effective date on our website at www.advocatesincorporated.org.

# **Complaints**

If you believe your privacy rights have been violated:

- You may file a complaint with the Advocates Compliance Officer at 300 South Manlius Street, Fayetteville, NY 13066; phone: 315-469-9931; email: <a href="mailto:carol@advocatesincorporated.org">carol@advocatesincorporated.org</a>
- You may contact the Secretary of the Department of Health and Human Services at 200 Independence Avenue South West, Washington, DC 20210; 1-877-696-6775.
- You may file a grievance with the Office for Civil Rights Region II at Jacob Javits Federal Building, 26 Federal Plaza, Suite 3312, New York, NY 10278; phone 800-368-1019; fax 212-264-3039; TDD 800-537-7696; email OCRComplaint@jjs.gov.

All complaints must be submitted in writing. You will not be penalized for filing a complaint.

If you have any questions about this notice, please contact:

**Carol Gentry** 

Director of Compliance, Quality & Incident Management (Compliance Officer/Privacy Officer)

**Advocates Incorporated** 

300 South Manlius Street, Fayetteville, NY 13066

Phone: 315-469-9931

Email: carol@advocatesincorporated.org