**Notice of Privacy Practices**

**THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED BY Riverside Counseling and Personal Development, LLC. AND HOW YOU CAN GAIN ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY. This notice is effective April 14, 2003. It is provided to you pursuant to provisions of the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”) and related federal regulations. If you have questions about this Notice please contact the Privacy Officer Annika Russaw at 470-301-9882.** Riverside Counseling and Personal development, LLC. is a Corporation in the state of Georgia responsible for providing a variety of professional services which deal with mental health and other confidential information. Both federal and state laws establish strict requirements for most programs regarding the disclosure of confidential information, and Riverside Counseling and Personal development, LLC. must comply with those laws. For situations where more stringent disclosure requirements do not apply, this Notice of Privacy Practices describes how Riverside Counseling and Personal development, LLC. may use and disclose any Protected Health Information (PHI) for treatment, payment, health care operations and for certain other purposes. **This notice relates only to health information.** It describes your rights to access and control any PHI, and provides information about your right to make a complaint if you believe Riverside Counseling and Personal development, LLC. has improperly used or disclosed any "PHI." Protected health information is information that may personally identify you or the child (ren) and relates to any past, present or future physical or mental health or condition and related health care services. Riverside Counseling and Personal development, LLC. is required to abide by the terms of this Notice of Privacy Practices, and may change the terms of this notice, at any time. A new notice will be effective for all PHI that Riverside Counseling and Personal development, LLC. maintains at the time of issuance. Upon request, Riverside Counseling and Personal development, LLC. will provide you with a revised Notice of Privacy Practices by posting copies at its’ facilities, publication on Riverside Counseling and Personal development, LLC.’s website, in response to a telephone or facsimile request to the Privacy Officer, or in person at any facility where you receive services from Riverside Counseling and Personal development, LLC.

1. **USES AND DISCLOSURES OF PROTECTED HEALTH INFORMATION**

Any PHI may be used and disclosed by Riverside Counseling and Personal development, LLC., its’ employees, contractors, agents and attorneys for the purpose of providing mental health services to you. Protected health information is routinely needed in order to ensure proper mental health treatment.

**Treatment:** Any PHI may be used to provide, coordinate, or manage your or your child’s mental health services, including coordination with a third party that has your permission to have access to any PHI, such as other health care professional who may be treating you or your child (ren), a health care specialist or laboratory.

**Payment:** Your PHI or that of the child (ren) may be used to obtain payment for your or your child (ren)’s health care services.

**Health Care Operations:** Riverside Counseling and Personal Development, LLC. may use or disclose any PHI to support the business activities of Riverside Counseling and Personal Development, LLC. including, but not limited to, quality assessment activities, employee review activities, and training, licensing, and other business activities. Riverside Counseling and Personal Development, LLC. may use a sign-in sheet at the registration desk at any facility or office where services are provided. You may be asked to provide your name and other necessary information, and you may be called by name in the waiting room when a staff member is ready to see you, and any PHI may be used to contact you about appointments and/or for other operational reasons. Any PHI may be shared with third party “business associates” who perform various activities that assist us in the provision of your or your child (ren)’s mental health services.

Other uses and disclosures of any PHI will be made only with your written authorization, which you may revoke in writing at any time, except as permitted or required by law as described below.

**Other Permitted or Required Uses and Disclosures with Your Authorization or Opportunity to Object**

The Department may use and/or disclose any PHI to a court of law, to a family member, relative or any other persons you identify onthe Riverside Counseling and Personal Development, LLC.. Authorization Form. You have the opportunity to agree or object to the use and/or disclosure ofall or part of any PHI.

**Permitted or Required Uses and Disclosures without Your Authorization or Opportunity to Object**

Riverside Counseling and Personal development, LLC. may use or disclose any PHI without your authorization when required to do so by law; for public health purposes, to a person who may be at risk of contracting a communicable disease, to a health oversight agency, to an authority authorized to receive reports of abuse or neglect, in certain legal proceedings, and for certain law enforcement purposes. Protected health information may also be disclosed without your authorization to a coroner, medical examiner or funeral director, for certain approved research purposes, to prevent or lessen a threat to health or safety, and to law enforcement authorities for identification or apprehension of an individual.

**Required Uses and Disclosures:** Under the law, Riverside Counseling and Personal development, LLC. must make disclosures to you, when required by the Secretary of the Department of Health and Human Services and to investigate or determine the Department's compliance with the requirements of the Privacy Rule at 45 CFR Sections 164.500 et.seq.

1. **YOUR RIGHTS UNDER THE FEDERAL PRIVACY RULE**

The following is a statement of your rights with respect to any PHI and a brief description of how you may exercise these rights:

1. **You have the right to inspect and copy your protected health information.**

Upon written request, you may inspect and obtain a copy of any PHI for as long as the Department maintains the PHI. A reasonable, cost-based fee for copying, postage and labor expense may apply. Under federal law you may not inspect or copy information compiled in anticipation of, or for use in, a civil, criminal, or administrative proceeding, or PHI that is subject to a federal or state law prohibiting access to such information.

1. **You have the right to request restriction of your protected health information.**

You may ask in writing that Riverside Counseling and Personal development, LLC. not use or disclose any part of any PHI for the purposes of treatment, payment or healthcare operations, and not to disclose PHI to family members or friends who may be involved in your care. Such a request must state the specific restriction requested and to whom you want the restriction to apply. Riverside Counseling and Personal Development, LLC.. is not required to agree to a restriction you request, and if Riverside Counseling and Personal Development, LLC.. believes it is in your best interest to permit use and disclosure of any PHI, the PHI will not be restricted, except as required by law. If Riverside Counseling and Personal development, LLC. does agree to the requested restriction, Riverside Counseling and Personal Development, LLC.. may not use or disclose any PHI in violation of that restriction unless it is needed to provide emergency treatment.

1. **You have the right to request to receive confidential communications from us by alternative means or at an alternative location.**

Upon written request, Riverside Counseling and Personal Development, LLC.. will accommodate reasonable requests for alternative means for the communication of confidential information, but may condition this accommodation upon your provision of an alternative address or other method of contact. Riverside Counseling and Personal Development, LLC.. will not request an explanation from you as to the basis for the request.

1. **You may have the right to request amendment of any protected health information.**

If Riverside Counseling and Personal development, LLC. created any PHI, you may request in writing an amendment of that information for as long as it is maintained by Riverside Counseling and Personal Development, LLC.. Riverside Counseling and Personal Development, LLC.. may deny your request for an amendment, and if it does so will provide information as to any further rights you may have with respect to such denial.

1. **You have the right to receive an accounting of certain disclosures** Riverside Counseling and Personal Development, LLC.**. has made of any protected health information.**

This right applies only to disclosures for purposes other than treatment, payment or healthcare operations, excluding any disclosures Riverside Counseling and Personal Development, LLC.. made to you, to family members or friends involved in your care, or for national security, intelligence or notification purposes. Upon written request, you have the right to receive legally specified information regarding disclosures occurring after April 14, 2003, subject to certain exceptions, restrictions and limitations.

**f. You have the right to obtain a paper copy of this notice from** Riverside Counseling and Personal Development, LLC.

1. **COMPLAINTS RELATED TO USE OR DISCLOSURE OF YOUR PROTECTED HEALTH INFORMATION OR RIGHTS**

You may complain to Riverside Counseling and Personal Development, LLC.. and to the Secretary of Health and Human Services if you believe your health information privacy rights have been violated. You may file a complaint, in writing, with Riverside Counseling and Personal development, LLC. which maintains any PHI. You must state the basis for your complaint. Riverside Counseling and Personal development, LLC. will not retaliate against you for filing a complaint. You may contact the Privacy Officer at 470-301-9882 or by mail to Attn: Privacy Officer, Riverside Counseling and Personal Development, LLC. 2774 Cobb Parkway NW, STE. 109 – 454, Kennesaw, GA 30152 for further information about the complaint process, this notice, or your rights set forth above. Please sign a copy of this Notice of Privacy Practices for Riverside Counseling and Personal development, LLC.’s records.

I have received a copy of this Notice on the date indicated below.

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Signature Date