



OFFICE ON MENTAL HEALTH/CORE SERVICE AGENCY OF HARFORD, INC AND YOUR HEALTH INFORMATION

NOTICE OF PRIVACY PRACTICES

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW CAREFULLY.

Introduction

The Office on Mental Health/Core Service Agency of Harford, Inc. (OMH/CSA) is committed to protecting your health information. OMH/CSA is required by law to maintain the privacy of Protected Health Information (PHI). PHI includes any identifiable information that we obtain from you or others that relates to your physical or mental health, the health care you have received, or payment for health care. As required by law, this notice provides you with information about your rights and our legal duties and privacy practices with respect to the privacy of PHI. In order to provide treatment or to pay for your healthcare, OMH/CSA will ask for certain health information and that health information will be put into your record. The record usually contains your symptoms, examination and test results, diagnoses, and treatment. That information, referred to as your health or medical record, and legally regulated as health information, may be used for a variety of purposes. OMH/CSA and its Business Associates are required to follow the privacy practices described in this Notice, although OMH/CSA reserves the right to change our privacy practices and the terms of this Notice at any time. You may request a copy of the new Notice from any OMH/CSA agency. It is also posted on our website at harfordmentalhealth.org.

Permitted Uses & Disclosures

OMH/CSA employees will only use your health information when doing their jobs. For uses beyond what OMH/CSA normally does, OMH/CSA must have your written authorization unless the law permits or requires it, and you may revoke such authorization with limited exceptions. The following are some examples of our possible uses and disclosures of your health information:

Uses and Disclosures without Consent Relating to Treatment, Payment, or Health Care Operations:

- **For treatment:** OMH/CSA may use or share your health information to approve, deny treatment, and to determine if your medical treatment is appropriate. For example, OMH/CSA health care providers may need to review your treatment with your healthcare provider for medical necessity or for coordination of care.
- **To obtain payment:** OMH/CSA may use and share your health information in order to bill and collect payment for your health care services and to determine your eligibility to participate in our services. For example, your health care provider may send claims for payment of medical services provided to you.
- **For health care operations:** OMH/CSA may use and share your health information to evaluate the quality of services provided, or to our state or federal auditors. We may also disclose your health information to third party "business associates" that perform various services on our behalf such as technical assistance, management of technology systems and crisis care coordination. In these cases, we will enter into a written agreement with the business associates to ensure they protect the privacy of your health information.

Other Uses and Disclosures of Health Information Required or Permitted by Law:

- **Information purposes:** Unless you provide us with alternative instructions, OMH/CSA may send appointment reminders and other materials about the program to your home.
- **Required by law:** OMH/CSA may disclose health information when a law requires us to do so.
- **Public health activities:** OMH/CSA may disclose health information when OMH/CSA is required to collect or report information about diseases, injuries, or to report vital statistics to other divisions in the organization and other public health authorities.
- **Health oversight activities:** OMH/CSA may disclose your health information to other divisions in the organization and other agencies for oversight activities required by law. Examples of these oversight activities are audits, inspections, investigations, and licensure.
- **Coroners, Medical Examiners, Funeral Directors and Organ Donations:** OMH/CSA may disclose health information relating to a death to coroners, medical examiners or funeral directors, and to authorized organizations relating to organ, eye, or tissue donations or transplants.
- **Research purposes:** In certain circumstances, and under the supervision of an authorized Institutional Review Board or other designated privacy board, OMH/CSA may disclose health information to assist medical research.
- **Avert threat to the health or safety:** In order to avoid a serious threat to health or safety, OMH/CSA may disclose health information as necessary to law enforcement or other persons who can reasonably prevent or lessen the threat of harm.
- **Abuse and neglect:** OMH/CSA will disclose your health information to appropriate authorities if we reasonably believe that you may be a possible victim of abuse, neglect, domestic violence, or some other crime. OMH/CSA may disclose your health information to the extent necessary to avert a serious threat to your health or safety or the health or safety of others.
- **Specific government functions:** OMH/CSA may disclose health information of military personnel and veterans in certain situations, to correctional facilities in certain situations, to government benefit programs relating to eligibility and enrollment, and for national security reasons, such as protection of the President. .
- **Family, friends, or others involved in your care:** OMH/CSA may share your health information with people as it is directly related to their involvement in your care or payment for your care. OMH/CSA may also share your health information with people to notify them about your location, general condition, or death.
- **Worker's compensation:** OMH/CSA may disclose health information to worker's compensation programs that provide benefits for work-related injuries or illnesses without regard to fault.
- **Patient directories:** OMH/CSA entities generally do not maintain directories for disclosures to callers or visitors who ask for you by name. However, if a OMH/CSA entity does maintain a directory, you will not be identified to an unknown caller or visitor without authorization, and the limited information we disclose may include your name, location in the entity, your general condition (e.g., fair, stable, etc.) and your religious affiliation.
- **Lawsuits, disputes and claims:** If you are involved in a lawsuit, a dispute, or a claim, OMH/CSA may disclose your health information in response to a court or administrative order, subpoena, discovery request, the investigation of a complaint filed on your behalf, or other lawful process.
- **Law enforcement:** OMH/CSA may disclose your health information to a law enforcement official for purposes that are required by law or in response to a subpoena.
- **Other parties for conducting permitted activities:** OMH/CSA may conduct the above-described activities ourselves, or we may use non-OMH/CSA entities (known as Business Associates) to perform those operations. In those instances where we disclose your PHI to a third party acting on our behalf, we will protect your PHI through an appropriate privacy agreement.

Your Rights

You Have a Right to:

- **Request restrictions:** You have the right to request a restriction or limitation on the health information OMH/CSA uses or discloses about you. OMH/CSA will accommodate your request if possible, but is not legally required to agree to the requested restriction. Except as otherwise required by law, OMH/CSA must accommodate your request if the disclosure is to a health plan for purposes of carrying out payment or health care operations (and is not for purposes of carrying out treatment); and the protected health information pertains solely to a health care item or service for which the health care provider involved has been paid out of pocket in full.
- **Request confidential communication:** You have the right to ask that OMH/CSA send you information at an alternative address or by alternative means. OMH/CSA must agree to your request as long as it is reasonably possible for us to do so.
- **Inspect and copy:** With certain exceptions (such as psychotherapy notes, information collected for certain legal proceedings, and health information restricted by law), you have a right to see your health information upon your written request. If you want copies of your health information, you may be charged a reasonable and cost-based fee for copying, postage, and preparing an explanation or summary of the protected health information. You have a right to choose what portions of your information you want copied and to have prior information on the cost of copying. If OMH/CSA maintains your health information using electronic health records, we may provide access in electronic format and transmit copies of the health information to an entity or person designated by you, provided that any such choice is clear, conspicuous, and specific.
- **Request amendment:** You may request in writing that OMH/CSA correct or add to your health record. OMH/CSA will respond to your request within 60 days, with up to a 30-day extension, if needed. OMH/CSA may deny the request if OMH/CSA determines that the health information is: (1) correct and complete; (2) not created by us and/or not part of our records; and/or (3) not permitted to be disclosed. If OMH/CSA approves the request for amendment, OMH/CSA will change the health information and inform you, and OMH/CSA will tell others that need to know about the change in the health information.
- **Require authorization:** You have the right to require your authorization for most uses and disclosures of psychotherapy notes, for receiving marketing communication and for the sale of your PHI.
- **Receive accounting of disclosures:** You have a right to request a list of the disclosures made of your health information after April 14, 2003, and in the six years prior to the date on which the accounting is requested. Exceptions are health information that has been used for treatment, payment, and health care operations. In addition, OMH/CSA does not have to list disclosures made to you, based on your written authorization, provided for national security, to law enforcement officers, or correctional facilities. There will be no charge for up to one such list each year. Additionally, OMH/CSA will provide an accounting for disclosures made through an electronic health record for treatment, payment, and health care operations, but information is limited to three years prior to date of request.
- **Opt-Out:** You have a right to opt-out of a OMH/CSA facility's patient directory (currently no such directory is kept and there are no fundraising activities through OMH/CSA).
- **Receive notice:** You have the right to receive a paper copy of this Notice and/or an electronic copy by mail upon request.
- **Receive breach notification:** You have the right to receive notification whenever a breach of your unsecured PHI occurs.



- **Receive protection of genetic information:** If any of OMH/CSA's health care components is considered a health plan, the health plan is prohibited from using or disclosing your genetic information for certain underwriting purposes.
- **Receive protection of mental health records:** If a medical record that is developed in connection with you receiving mental health services is disclosed without your authorization, OMH/CSA will only release the information in your record that is relevant to the purpose for which the disclosure is sought.

To Report a Problem about our Privacy Practices:

If you believe that your privacy rights have been violated, you may file a complaint.

- You can file a complaint with the Office on Mental Health Core Service Agency through the grievance process online at harfordmentalhealth.org or by calling 410-803-8726 and requesting the Executive Director.
- You can file a complaint with the Secretary of the U.S. Department of Health and Human Services, Office of Civil Rights.

OMH/CSA will take no retaliatory action against you if you make such complaints.