

NOTICE OF POLICIES TO PROTECT THE PRIVACY OF YOUR HEALTH INFORMATION

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

PLEASE REVIEW IT CAREFULLY

Shelia D. Duncan, LCSW-C has developed this Notice of Privacy Practices (“Notice”) to comply with the Health Insurance Portability and Accountability Act of 1996 (HIPAA). HIPAA was enacted by Congress to establish standards for protecting the confidentiality and security of your health information.

Shelia D. Duncan, LCSW-C follows the privacy practices described in this Notice. This Notice describes the general ways your protected health information may be used and disclosed in order for Shelia D. Duncan, LCSW-C to for treatment, payment and health care operations with your written authorization. Protected health information (PHI), as described by HIPAA, means your personal health information, which is found in your medical and billing records and conditions or the provision of payment for services related to payment and health care operations and activities, this may include information created or received by health care providers, benefit plan sponsors, and insurance companies.

Your Health Information Rights

As a client receiving services from Shelia D. Duncan, LCSW-C, you have the following rights regarding your protected health information. To exercise any of the following rights, regarding your protected health information, you must submit a written request to Shelia D. Duncan, LCSW-C.

Notice of Privacy Practices

Right to inspect and copy: You have the right to inspect and/or receive a copy of your protected health information maintained by Shelia D. Duncan,

LCSW-C. Shelia D. Duncan, LCSW-C may charge you a reasonable fee for copying your information.

Right to request amendment: If you believe your protected health information maintained by Shelia D. Duncan, LCSW-C is incorrect or incomplete, you may request an amendment to your information. Shelia D. Duncan, LCSW-C is not required to agree to your request.

Right to request restriction: You may request limitations on how Shelia D. Duncan, LCSW-C uses and/or discloses your protected health information. For example, you may ask Shelia D. Duncan, LCSW-C to not disclose that you have had a particular procedure. Shelia D. Duncan, LCSW-C agrees to your request unless the use or disclosure is necessary in order to provide you with emergency treatment or is otherwise required by law.

Right to receive confidential communications: You may request that communications with Shelia D. Duncan, LCSW-C regarding your protected health information be provided to you in an alternative way or at an alternative location. If you state that the disclosure of all or part of your protected health information goes to an address other than your usual mailing address, you must specify in writing how or where you wish to be contacted.

Right to accounting of disclosures: You may request a list of Shelia D. Duncan, LCSW-C, disclosures of your protected health information that have been made to the person or entities other than for the purposes of health care treatment, payment or operations, or pursuant to your specific authorization. This will contain each disclosure Shelia D. Duncan, LCSW-C has made for the past six years, but not prior to September 30, 2013. If you make more than one request in a 12-month period, Shelia D. Duncan, LCSW-C may charge you a reasonable fee.

Shelia D. Duncan LCSW-C Responsibilities

Shelia D. Duncan, LCSW-C is required by law to:

1. Ensure your protected health information, that identifies you, is kept private in accordance with federal and state law and;

2. Provide you with this Notice of Shelia D. Duncan, LCSW-C 's legal duties and privacy practices with respect to your protected health information; and
3. Follow the terms of this Notice as long as it is in effect.

Use and Disclosure of Your Protected Health Information

The following is a list of ways Shelia D. Duncan, LCSW-C may use and disclose your protected health information (PHI). Each bold-faced section provides you with examples of how your information will be used and/ or disclosed. Not every possible use or disclosure is in any given section listed, however, all of the ways Shelia D. Duncan, LCSW-C is permitted to use and disclose information will fall within one of the bold-faced print sections below.

Treatment: Shelia D. Duncan, LCSW-C may disclose your protected health information to doctors, dentists, pharmacies, hospitals, and other health care providers who provide medical treatment services to you. For example, a psychiatrist may request protected health information from Shelia D. Duncan, LCSW-C to supplement their own records to ensure they are informed about your medical condition and treatment needs.

****Payment:** Shelia D. Duncan, LCSW-C may use and disclose your protected health information to help pay for your covered services in a number of ways, including but not limited to: conducting utilization and medical necessity reviews; coordinating care; determining eligibility; determining formulary compliance; collecting premiums; calculating cost-sharing amounts; coordination of benefits with other insurers; claims adjudication and settling subrogation claims; and responding to complaints, appeals and requests for external review. For example, Shelia D. Duncan, LCSW-C may use your protected health information to decide whether a particular treatment is medically necessary and may disclose this information to your provider.

Health Care Operation: Shelia D. Duncan, LCSW- C may use and disclose your protected health information for routine health care operations. Health care operations include quality improvement, credentialing of providers, outcomes assessment, care coordination, administration of reinsurance and stop loss; underwriting and rating; detection and investigation of fraud, and

other general administrative activities, including data and information systems management and customer service. For example, Shelia D. Duncan, LCSW-C may use your protected health information when assessing a particular outcome. Shelia D. Duncan, LCSW-C may share your protected health information with your health care providers to assist in their health care operations.

Appointments and Alternatives: Shelia D. Duncan, LCSW-C may use and disclose your health care information to contact you to provide appointment reminders or information about our programs and other communications regarding your case management or care coordination.

Business Associates: Shelia D. Duncan, LCSW-C may disclose your protected health information to business associates in order to carry out treatment, payment, or health care operations. For example, Shelia D. Duncan, LCSW-C may disclose your protected health information to a company who prepares documents for billing or transcription purposes.

Correctional Institutions: If you are an inmate of a correctional institute or under the custody of a law enforcement official, Shelia D. Duncan, LCSW-C may disclose your protected health information to the correctional institution to provide security of the correctional institution.

Health Oversight Activities: Shelia D. Duncan, LCSW-C may disclose your protected health information to a health oversight or regulatory agency or entity for activities authorized by law, such as audits, investigations, inspections, and licensure.

Health-Related Benefits and Services: Shelia D. Duncan, LCSW-C may disclose your protected health information with your permission a family member, other relative, or close personal friend who is involved in your medical care or in the payment for your medical if the protected health information disclosed is directly relevant to such person's involvement, unless you tell Shelia D. Duncan, LCSW-C otherwise.

Law Enforcement: Shelia D. Duncan, LCSW-C may disclose your protected health information for law enforcement purposes, as required by law or in response to a valid subpoena.

Child Abuse: Shelia D. Duncan, LCSW-C by law must report information about child and neglect to the appropriate authorities.

Lawsuits and Disputes: Shelia D. Duncan, LCSW-C may disclose your protected health information in response to a court or administrative order. In addition, Shelia D. Duncan, LCSW-C may disclose your protected health information in response to a valid subpoena, discovery request or to obtain an order protecting the information requested, as requested by law.

****Medical Examiners:** **Shelia D. Duncan, LCSW-C may disclose protected health information to health examiner in coordination with your physician to identify a deceased person or to determine the cause of death, or as otherwise permitted by law.

Public Health Activities: As required by law, Shelia D. Duncan, LCSW-C may disclose your protected health information for public health activities, including, but not limited to, reporting child abuse or neglect; notifying government authorities of suspected abuse, neglect or domestic violence.

Research: Shelia D. Duncan, LCSW-C may disclose your protected health information to researchers when the research has been legally approved and protocols have been established to ensure the privacy of your protected health information.

Serious Threat to Health or Safety: Shelia D. Duncan, LCSW-C may disclose your protected health information when Shelia D. Duncan, LCSW-C deems it necessary to prevent a serious threat to your health and safety of the health and safety of the public or another person.

Written Authorization: Except as described above, Shelia D. Duncan, LCSW-C will not use or disclose your protected health information unless you authorize such use or disclosure to Shelia D. Duncan, LCSW-C in writing. A

written revocation will not apply to any previous use or disclosure of protected health information made in good faith under prior authorization.

Changes to this Notice: Shelia D. Duncan, LCSW-C reserve the right to change this Notice from time to time. Shelia D. Duncan, LCSW-C reserves the right to make the revised Notice effective for protected health information. The revised Notice will be provided to you in writing within 60 days of the changes.

Complaints: If you believe your privacy rights have been violated, you may file a complaint with Shelia D. Duncan, LCSW-C and with the Secretary of the United States Department of Health and Human Services. You will not be penalized or retaliated against in any way for making a complaint to the United States Department of Health and Human Services.

Emergency Situations: If you are in an emergency situation for which you feel immediate attention is necessary, please contact emergency services (911) immediately or go to your nearest hospital emergency room. I will follow up emergency services with standard individualized counseling practices once you are released. I am available to be notified through voice message services at (301) 776-4617. Please indicate when a call is urgent or is a follow up of emergency services as calls are returned during normal business hours. Phone calls and voicemails will not be returned during holidays or on weekends. Normal business hours are Monday through Friday 10:00 a.m.- 7:00 p.m.

EFFECTIVE DATE OF THIS NOTICE

This notice went into effect on September 20, 2013