

Notice of Dr. Federici's Policies and Practices to Protect the Privacy of Your Health Information

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

I. Uses and Disclosures for Treatment, Reimbursement, and Health Care Operations

Dr. Federici may use or disclose your protected health information (PHI), for treatment, payment, and health care operations purposes with your consent. To help clarify these terms, here are some definitions:

“PHI” refers to information in your health record that could identify you.

“Treatment, Payment and Health Care Operations”

– *Treatment* is when Dr. Federici provides, coordinates or manages your health care and other services related to your health care. An example of treatment would be when your doctor or therapist consults with another health care provider, such as your family physician or another psychologist, psychiatrist or counselor.

- *Reimbursement* is when you file for payment for your healthcare with your insurance company.

- *Health Care Operations* are activities that relate to the performance and operation of this practice. Examples of health care operations are evaluations and testing.

“Disclosure” applies to activities outside of Dr. Federici's office, such as releasing, transferring, or providing access to information about you to other parties.

II. Uses and Disclosures Requiring Authorization

Dr. Federici may use or disclose PHI for purposes outside of treatment, payment, and health care operations when your appropriate authorization is obtained. An “authorization” is written permission above and beyond the general consent that permits only specific disclosures. In those instances when Dr. Federici is asked for information for purposes outside of treatment, payment and health care operations, your doctor or therapist will obtain an authorization from you before releasing this information. Dr. Federici also need to obtain an authorization before releasing your psychotherapy notes. “Psychotherapy notes” are notes Dr. Federici has made about your conversation during a private, group, joint, or family counseling session. These notes are given a greater degree of protection than PHI. You may revoke all such authorizations (of PHI or psychotherapy notes) at any time, provided each revocation is in writing. You may not revoke an authorization to the extent that (1) Dr. Federici has relied on that authorization; or (2) if the authorization was obtained as a condition of obtaining insurance coverage, and the law provides the insurer the right to contest the claim under the policy.

III. Uses and Disclosures with Neither Consent nor Authorization

Dr. Federici may use or disclose PHI without your consent or authorization in the following circumstances:

Child Abuse: If your doctor or therapist has cause to believe that a child has been, or may be, abused, neglected, or sexually abused.

Adult and Domestic Abuse: If Dr. Federici has cause to believe that an elderly or disabled person is in a state of abuse, neglect, or exploitation.

Health Oversight: If a complaint is filed against your doctor or therapist with the State Board of Examiners of Psychologists, or the State Board of Medical Examiners, they have the authority to subpoena confidential mental health information from your doctor or therapist relevant to that complaint.

Judicial or Administrative Proceedings: If you are involved in a court proceeding and a request is made for information about your diagnosis and treatment and the records thereof, such information is privileged under state law, and your doctor or therapist will not release information, without written authorization from you or your personal or legally appointed representative, or a court order. The privilege does not apply when you are being evaluated for a third party or where the evaluation is court ordered. You will be informed in advance if this is the case.

Serious Threat to Health or Safety: If your doctor or therapist determines that there is a probability of imminent physical injury by you to yourself or others, or there is a probability of immediate mental or emotional injury to you, your doctor or therapist may disclose relevant confidential mental health information to medical or law enforcement personnel.