



## **NOTICE OF PRIVACY PRACTICES**

THIS NOTICE DESCRIBES HOW MEDICAL/HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED, AND HOW YOU CAN BEST GET ACCESS TO THIS INFORMATION. PLEASE READ CAREFULLY!

### **SUMMARY**

This "Notice of Privacy Practices" describes how we may use and disclose your medical/health information as authorized or required by law, including the Federal HIPAA Privacy Rule and child protection laws and regulations.

This information is called "protected health information," which includes any information that relates to your past, present, or future physical or mental health or condition or related health care services and may identify you personally, such as name, social security number, or address.

The Partnership for Children of Essex (PCE) is required by law to maintain the privacy of your protected health information and to abide by the terms of this Notice. You are entitled to this description of its legal duties and privacy practices.

You have certain rights to access and control your protected health information, which is described below. You also have the right to file a complaint if you believe your privacy rights have been violated. You may contact our Privacy Officer if you would like further information about your privacy rights or the complaint process: James Moschella, 571 Central Ave., Newark, NJ 07107 or 973-323-3000.

### **USES AND DISCLOSURES OF YOUR PROTECTED HEALTH INFORMATION**

The confidentiality of our clients is very important to PCE. However, PCE may be required or permitted by law to disclose or use your protected health information in several situations including the following:

- Treatment - The provision, coordination, or management of your health care and related services. Example: Disclose your health information to a treatment facility or treatment provider.
- Payment - Coverage determinations; billings; claims management; reviews for medical necessity; and activities needed to obtain payment for your health services. Example: Obtaining approval for a hospital admission or residential placement may require disclosure of certain protected health information to a health plan.
- Health care operations - The functions and activities required for PCE to function as a health care provider. Examples: Evaluating health care performance; utilization management; accreditation and professional licensure board investigations; medical reviews; and business management.
- Business associates with whom PCE contracts to perform services for PCE.
- Public health activities
- Health oversight agencies, including, but not limited to, the Federal Department of Health and Human Services and the State Division of Child Behavioral Health Services.
- Law enforcement
- Avert serious threat to the health or safety of an individual, including the danger to self or others as the result of suicidal or homicidal ideation or behaviors.
- Child abuse and/or negligence – PCE is required by law to report any suspected child abuse or neglect.
- Workers compensation claims
- By order of a municipal, county, state, or federal court.

## YOUR HEALTH INFORMATION RIGHTS

The law provides you with these rights related to your protected health information:

### Inspect and Copy Protected Health Information

You may request to review and/or receive a copy of your protected health information maintained by PCE in your "designated health information records." This includes medical records; billing records; enrollment, payment, claims adjudication, and appeal records; progress notes; and any other information used to make decisions about your health care. Requests must be made in writing. Upon receipt of a written request, PCE will arrange for the review or copies to be available as quickly as possible and within no more than 30 days. A small fee for copies and postage may be applied to cover the cost of making the copies and any related postage.

### Restricting Protected Health Information

You may request that certain protected health information about you not be used or disclosed for treatment, payment, or health care operational purposes. However, PCE is not legally required to agree to your requested restrictions.

### Amending Protected Health Information

If you believe that PCE has protected health information about you that is incomplete or incorrect, you may request that it be amended. If PCE disagrees with your request, you will be notified in writing of the reason for the denial, which sometimes can be appealed.

### Accounting of Disclosures

All disclosures that are not for treatment, payment, or health care operations or are not specifically authorized by you must be recorded by PCE and the accounting made available to you upon your request.

### Alternative Means of Communication

If you want to receive communications from PCE in a different manner or at a different location, you may notify PCE of this.

### Paper Copy of This Notice

A paper copy of this notice will be provided to each client upon registration with the PCE. PCE reserves the right to revise this document and will provide updated copies to each client as needed.

TO EXERCISE ANY OF THESE RIGHTS, OR DISCUSS THEM FURTHER, you may contact the PCE Privacy Officer at 571 Central Avenue, Newark, NJ 07107.

## COMPLAINTS

If you believe that PCE may have violated any of your privacy rights, you may file a written complaint with the PCE Privacy Officer or the U.S. Department of Health and Human Services for Civil Rights. **YOU WILL NOT BE RETALIATED AGAINST OR PENALIZED FOR FILING A COMPLAINT.**

More information on HIPAA, confidentiality, how to request records, and your related rights can be found on the "Confidentiality and HIPAA" page of our website, [www.pcenj.org](http://www.pcenj.org).