

# Pine Street Inn Behavioral Health Programs

## 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 it carefully.

### I. Who We Are

This notice describes the privacy practices of Pine Street Inn Behavioral Health Programs, which include the Men's Stabilization Program, located on the campus of the Lemuel Shattuck Hospital in Jamaica Plain, Massachusetts.

### II. Our Privacy and Confidentiality Obligations

We are required by law to maintain the privacy and confidentiality of information about your health, health care, and payment for services related to your health (referred to in this notice as "protected health information" or "information") and to provide you with this notice of our legal duties and privacy practices with respect to your protected health information. When we use or disclose this information, we are required to abide by the terms of this notice (or other notice in effect at the time of the use or disclosure).

#### ⤴ **Protected Health Information in connection with alcohol or drug services:**

42 CFR Part 2 protects your health information if you are applying for or receiving services (including diagnosis or treatment, or referral) for drug or alcohol abuse. Generally, if you are applying for or receiving services for drug or alcohol abuse, we may not acknowledge to a person outside the program that you attend the program or disclose any information identifying you as an alcohol or drug abuser except under certain circumstances that are listed in this notice.

#### ⤴ **All Protected Health Information, including alcohol or drug services:**

The Health Insurance Portability and Accountability Act ("HIPAA") Privacy Regulations (45 CFR Parts 160 and 164), also protect your health information whether or not you are applying for or receiving services for drug or alcohol abuse. Generally, if you are not applying for or receiving services for drug or alcohol abuse, the way we may use and disclose information differs slightly. These differences will be listed in this notice.

### III. Uses and Disclosures WITH Your Authorization: All Protected Health Information

- ⤴ Generally, we may use or disclose your protected health information when you give your authorization to do so in writing on a form that specifically meets the requirements of laws and regulations that apply.
- ⤴ There are some exceptions and special rules that allow for uses and disclosures without your authorization or consent. They are listed in section IV.
- ⤴ You may revoke your authorization except to the extent that we have already taken action upon the authorization. If you are currently receiving care and wish to revoke your authorization, you will need to deliver a written statement to your primary counselor. After you are discharged, you will need to send the written statement to the attention of Pine Street Inn Behavioral Health Privacy Officer, 170 Morton Street Jamaica Plain, MA 02130.
- ⤴ Please be aware of the fact that a court with appropriate jurisdiction or other authorized third party could request or compel you to sign an authorization.

#### IV. Uses and Disclosures WITHOUT Your Authorization: All Protected Health Information

Even when you have not given your written authorization, we may use and disclose information under the circumstances listed below. This list applies to all protected health information, including the information we get when you are applying for or receiving services for drug or alcohol abuse.

A. **Treatment.** We may use or disclose your protected health information for treatment purposes. Treatment includes diagnosis, treatment and other services, including discharge planning. For example, clinicians may disclose your health information to each other to coordinate individual and group therapy sessions for your treatment or information about treatment alternatives or other health-related benefits and services that are necessary or may be of interest to you.

B. **Health Care Operations.** We may use or disclose your protected health information for the purposes of health care operations that include internal administration and planning and various activities that improve the quality and effectiveness of care. For example, we may use information about your care to evaluate the quality and competence of our clinical staff. We may disclose information to qualified personnel for outcome evaluation, management audits, financial audits, or program evaluation; however, such personnel may not identify, directly or indirectly, any individual patient in any report of such audit or evaluation, or otherwise disclose patient identities in any manner. We may disclose your information as needed within Pine Street Inn in order to resolve any complaints or issues arising regarding your care. We may also disclose your protected health information to an agent or agency which provides services to Pine Street Inn under a qualified service organization agreement and/or business associate agreement, in which they agree to abide by applicable federal law and related regulations (42 CFR Part 2 and HIPAA). These examples are for illustration only and not intended to be an exclusive list of all of the potential uses and disclosures that may be made for health care operations.

Other allowable uses and disclosures without your authorization, aside from treatment and health care operations, include:

1. Medical Emergencies. We may disclose your protected health information to medical personnel to the extent necessary to meet a bona fide medical emergency (as defined by 42 CFR Part 2).

2. Incompetent and Deceased Patients. In such cases, authorization of a personal representative, guardian or other person authorized by applicable state law may be given in accordance with 42 CFR Part 2.

3. Decedents. We may disclose protected health information to a coroner, medical examiner or other authorized person under laws requiring the collection of death or other vital statistics, or which permit inquiry into the cause of death.

4. Judicial and Administrative Proceedings. We may disclose your protected health information in response to a court order that meets the requirements of federal regulations, 42 CFR Part 2 concerning Confidentiality of Alcohol and Drug Abuse Patient Records.

Note also that if your records are not actually “patient records” within the meaning of 42 CFR Part 2 (e.g., if your records are created as a result of your participation in a Pine Street Inn program other than a clinical treatment program), your records may not be subject to the protections of 42 CFR Part 2.

5. Commission of a Crime on Premises or against Program Personnel. We may disclose your protected health information to the police or other law enforcement officials if you commit a crime on the premises or against program personnel or threaten to commit such a crime.

6. Child Abuse. We may disclose your protected health information for the purpose of reporting child abuse and neglect to public health authorities or other government authorities authorized by law to receive such reports.

7. Duty to Warn. Where the program learns that a patient has made a specific threat of serious physical harm to another specific person or the public, and disclosure is otherwise required under statute and/or common law, the program will carefully consider appropriate options that would permit disclosure.

8. Audit and Evaluation Activities. We may disclose protected health information to those who perform audit or evaluation activities for certain health oversight agencies, e.g., state licensure or certification agencies which oversee the health care system and ensures compliance with regulations and standards, or those providing financial assistance to the program.

9. Fundraising. We may contact you for fundraising/marketing efforts. You have the right to opt out of receiving such fundraising/marketing communications.

## V. Your Individual Rights

A. Right to Receive Confidential Communications. Normally we will communicate with you through the phone number and /or address you provide. You may request, and we will accommodate, any reasonable, written request for you to receive your protected health information by alternative means of communication or at alternative locations.

B. Right to Request Restrictions. You may request restrictions on our use and disclosure of protected health information for treatment, payment and health care operations. While we will consider requests for restrictions carefully, we are not required to agree to a requested restriction. If you wish to request restrictions and you are currently receiving services, please contact your primary clinician. Once you are no longer receiving services, contact Pine Street Inn’s Behavioral Health Privacy Officer. We will send you a written response.

C. Right to Inspect and Copy Your Health Information. You may request access to your clinical file and billing records maintained by us in order to inspect and request copies of the records. Under limited circumstances, we may deny you access to a portion of your records. If you desire access to your records and you are currently receiving services, please ask your clinician for the records. Once you are no longer receiving services, contact Pine Street Inn’s Behavioral Health Privacy Officer in writing. If you request copies, there will be a charge for each page copied and you will be told the cost prior to the copies being

made.

D. Right to Amend Your Records. You have the right to request that we amend protected health information maintained in your clinical file or billing records. If you desire to amend your records and you are currently receiving services, please contact your primary clinician. Once you are no longer receiving services, contact the Pine Street Inn's Behavioral Health Privacy Officer in writing. Under certain circumstances, Pine Street Inn has the right to deny your request to amend your records and will notify you of this denial as provided in the HIPAA regulations. If your requested amendment to your records is accepted, a copy of your amendment will become a permanent part of the medical record. When we "amend," a record, we may append information to the original record, as opposed to physically removing or changing the original record. If your requested amendment is denied, you will be informed of your right to have a brief statement of disagreement placed in your medical records.

E. Right to Receive an Accounting of Disclosures. Upon request, you may obtain a list of instances that we have disclosed your protected health information other than when you gave written authorization OR those related to your treatment and payment for services, or our health care operations. The accounting will apply only to covered disclosures prior to the date of your request provided such period does not exceed seven years. If you request an accounting more than once during a twelve (12) month period, there will be a charge. You will be told the cost prior to the request being filled.

F. Right to Receive a Paper Copy of This Notice. Upon request, you may obtain a paper copy of this notice.

G. Right to Receive Notification of a Breach. You have the right to and will receive notifications of breaches of your unsecured Protected Health Information.

H. For Further Information and Complaints. If you desire further information about your privacy and confidentiality rights, you may contact the Pine Street Inn Behavioral Health Privacy Officer at 617-892-9451. You may call this number if you are concerned that we have violated your privacy rights, if you disagree with a decision that we made about access to your protected health information, or if you wish to complain about our breach notification process. You may also file a written complaint with the Secretary of the United States Department of Health and Human Services. Upon request, we will provide you with the correct address. We will not retaliate against you if you file a complaint.

Violation of federal law and regulations on Confidentiality of Alcohol and Drug Abuse Patient Records is a crime and suspected violations of 42 CFR Part 2 may be reported to the United States Attorney in the district where the violation occurs.

## VI. Effective Date and Duration of This Notice

A. Effective Date. This notice is effective on September 26, 2013.

B. Right to Change Terms of This Notice. We may change the terms of this notice at any time. If we change this notice, we may make the new notice terms effective to all protected health information that we maintain, including any information created or received prior to

issuing the new notice. If we change this notice, we will post the new notice in public access areas at our service sites and on our website at [www.pinestreetinn.org](http://www.pinestreetinn.org). You may also obtain any new notice by contacting the Pine Street Inn Behavioral Health Privacy Officer.

C. Privacy Officer. You may contact the Pine Street Inn Behavioral Health Privacy Officer at 617-892-9451.