

NOTICE OF PRIVACY PRACTICES



CATHOLIC CHARITIES DIOCESE OF MADISON
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Effective Date: 3/31/2013

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

PLEASE REVIEW IT CAREFULLY.

If you have any questions about this notice, please contact Catholic Charities, Diocese of Madison, Chief Operating Officer (Privacy Officer), 702 S. High Point Road, Ste. 201 Madison, WI 53719 or telephone (608) 826-8000.

WHO WILL FOLLOW THIS NOTICE.

This notice describes **Catholic Charities, Diocese of Madison**, (hereafter referred to as Catholic Charities) practices and that of:

- Any health care professional authorized to enter information into your service record.
- All departments and units of Catholic Charities.
- Any member of a volunteer group we allow to help you while you are a client with Catholic Charities.
- All employees, staff and other Catholic Charities personnel.

734 Madison Ave., Fort Atkinson, WI; 2020 E. Milwaukee Street, Janesville, WI; 2200 W. Court Street, Janesville, WI; 702 S. High Point Drive, Madison, WI; 230 Central Avenue, Montello, WI; P.O. Box 29, Baraboo, WI;

All these entities, sites and locations follow the terms of this notice. In addition, these entities, sites and locations may share health and service information with each other for treatment, payment or Catholic Charities' health care operations purposes described in this notice.

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OUR PLEDGE REGARDING HEALTH AND SERVICE INFORMATION:

We understand that health and service information about you is personal. We are committed to protecting health and service information about you. We create a record of the care and services you receive at the Catholic Charities. We need this record to provide you with quality service and to comply with certain legal requirements. This notice applies to all of the records of your service generated by the Catholic Charities.

This notice will tell you about the ways in which we may use and disclose health and service information about you. We also describe your rights and certain obligations we have regarding the use and disclosure of health and service information.

We are required by law to:

- Make sure that health and service information that identifies you is kept private;
- Give you this notice of our legal duties and privacy practices with respect to health and service information about you;
- Follow the terms of the notice that is currently in effect; and
- Notify you following a privacy or security breach involving your unsecured health and service information.

HOW WE MAY USE AND DISCLOSE MEDICAL INFORMATION ABOUT YOU.

The following categories describe different ways that we use and disclose health and service information. For each category of uses or disclosures we will explain what we mean and try to give some examples. Not every use or disclosure in a category will be listed. However, all of the ways we are permitted to use and disclose information will fall within one of the categories.

The descriptions below address uses and disclosures of health and service information that are permitted under a federal law called the Health Insurance Portability and Accountability Act of 1996 (HIPAA). HIPAA limits how we can use and disclose your health and service information. (HIPAA refers to this information as “protected health information,” but we use the term “health and service information.”) In certain instances state law limits the use and disclosure of your health and service information in a manner that is stricter than HIPAA. For example, Wisconsin law restricts the use and disclosure of certain mental health, developmental disability, alcohol and drug treatment, and HIV records in a way that is stricter than HIPAA. When a stricter state law applies in regard to our use and disclosure of your health and service information, we will follow state law.

- **For Treatment (Service Delivery).** We may use health and service information about you to provide you with services. We may disclose health and service information about you to other staff members, technicians, students, or other

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Catholic Charities' personnel who are involved in providing services to you at Catholic Charities. For example, a staff member providing family counseling services to you may need to know if you are receiving other services at Catholic Charities in order to make the family counseling services more effective. Different departments of Catholic Charities also may share health and service information about you in order to coordinate the different things you need, such as assessments and other services.

- **For Payment.** We may use and disclose health and service information about you so that the services you receive at Catholic Charities may be billed to and payment may be collected from you, an insurance company or a third party. For example, we may need to give your health plan information about counseling services you received at Catholic Charities so your health plan will pay Catholic Charities or reimburse you for the service. We may also tell your health plan about a service you are going to receive to obtain prior approval or to determine whether your plan will cover the service.
- **For Health Care Operations.** We may use and disclose health and service information about you for Catholic Charities' health care operations. These uses and disclosures are necessary to run Catholic Charities and make sure that all of our clients receive quality services. For example, we may use health and service information to review our services and to evaluate the performance of our staff in caring for you. We may also combine health and service information about many Catholic Charities clients to decide what additional services Catholic Charities should offer, what services are not needed, and whether certain new services are effective. We may also disclose information to other staff members, volunteers, students, and other Catholic Charities' personnel for review and learning purposes.
- **Appointment Reminders.** We may use and disclose health and service information to contact you as a reminder that you have an appointment for services at Catholic Charities.
- **Service Alternatives.** We may use and disclose health and service information to tell you about or recommend possible service options or alternatives that may be of interest to you.
- **Health-Related Benefits and Services.** We may use and disclose health and service information to tell you about health-related benefits or services that may be of interest to you.
- **Personal Representatives.** We will disclose your health and service information to individuals authorized by you, such as a personal representative, attorney-in-fact, etc. We will require that you provide us with appropriate written notice and authorization and any supporting documents (e.g., power of attorney). We do not, however, have to disclose information to a personal representative if, in the

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exercise of professional judgment, we believe it is not in your best interest to treat the person as your personal representative. For example, we may not release information if you have been, or may be, subjected to domestic violence, abuse, or neglect by the person or the person could otherwise endanger you.

- **Individuals Involved in Your Care or Payment for Your Care.** In certain circumstances, we may release health and service information about you to a friend, family member, or other person you have identified who is involved in your care or payment for your care. If you are present or otherwise available, we may release information if you agree or if we ask and you do not object. We may also release information if we reasonably infer from the circumstances that you do not object (e.g., you bring a spouse to an appointment). If you are not present or cannot be provided with an opportunity to agree or object (e.g., because you are incapacitated), we may release information if we determine, using our professional judgment, that the disclosure is in your best interest and we disclose only the health and service information that is directly relevant to the person's involvement with your care.
- **Facility Directory.** If you are receiving care in a facility that maintains a facility directory, we may include in the directory your name, location in the facility, general condition, and religious affiliation. Unless you object, we may share this information with members of the clergy. We may also share this information (except for religious affiliation) with persons who ask for you by name.
- **Business Associates.** Catholic Charities provides some services through contracts with business associates. When these services are performed under a contract agreement we may disclose your health information to our business associates so that they can perform the job we've asked them to do. To protect your protected health and service information, however, we require any one whom Catholic Charities' identifies as a business associate to appropriately protect (safeguard) your information through a signed Business Associate Agreement.
- **Marketing and Fundraising.** Catholic Charities will not use or disclose your protected health and service information for *marketing* or *fundraising purposes* without first obtaining your written authorization (permission).
- **Research.** Under certain circumstances, we may use and disclose health and service information about you that has been de-identified (*information disclosed could not be identified as being related to you*) specifically for research purposes. For example, a research project may involve comparing the recovery of all clients who received one type of service to those who received another, for the same condition. All research projects, however, are subject to a special approval process. This process evaluates a proposed research project and its use of health and service information, trying to balance the research needs with clients' need for privacy of their health and service information. Before we use or disclose de-identified health and service information for research, the project will have been

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approved through this research approval process. We may, however, disclose health and service information about you to people preparing to conduct a research project. For example, we may disclose information to researchers to help them look for clients with specific health and service needs, so long as the health and service information they review does not leave Catholic Charities. If the researcher will have access to your name, address or other information that reveals who you are, or will be involved in your care at Catholic Charities we will always obtain your specific written authorization (permission).

- **Psychotherapy Notes.** Your authorization is required for the use or disclosure of psychotherapy notes, except in the following circumstances:
 - Use by the individual who created the psychotherapy notes;
 - Use or disclosure by us for our own training programs related to mental health counseling;
 - Use or disclosure by us for our defense in a law suit or other proceeding brought by you; or
 - Certain required disclosures, including disclosures for HIPAA compliance audits by the Secretary of the Department of Health and Human Services, health oversight activities related to the individual who created the psychotherapy notes, disclosures to coroners and medical examiners, and disclosures necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public.
- **As Required By Law.** We will disclose health and service information about you when required to do so by federal, state or local law.
- **To Avert a Serious Threat to Health or Safety.** We may use and disclose health and service information about you when necessary to prevent a serious threat to your health and safety or the health and safety of the public or another person.

SPECIAL SITUATIONS

- **Military and Veterans.** If you are a member of the armed forces, we may release health and service information about you as required by military command authorities. We may also release health and service information about foreign military personnel to the appropriate foreign military authority.
- **Workers' Compensation.** We may release health and service information about you for workers' compensation or similar programs. These programs provide benefits for work-related injuries or illness.

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- **Public Health Risks.** We may disclose health and service information about you for public health activities. These activities generally include the following:
 - To prevent or control disease, injury or disability;
 - To report births and deaths;
 - To report child abuse or neglect;
 - To report reactions to medications or problems with products;
 - To notify people of recalls of products they may be using;
 - To notify a person who may have been exposed to a disease or may be at risk for contracting or spreading a disease or condition;
 - To notify the appropriate government authority if we believe a patient has been the victim of abuse, neglect or domestic violence. Catholic Charities will only make this disclosure if you agree or when Catholic Charities is required or authorized by law to do so.
- **Health Oversight Activities.** We may disclose health and service information to a health oversight agency for activities authorized by law. These oversight activities include, for example, audits, investigations, inspections, and licensure. These activities are necessary for the government to monitor the health care system, government programs, and compliance with civil rights laws.
- **Government Audits.** We are required to disclose your health and service information to the Secretary of the United States Department of Health and Human Services when the Secretary is investigating or determining our compliance with HIPAA.
- **Coroners, Medical Examiners, and Funeral Directors.** We may release health and service information to a coroner or medical examiner. This may be necessary, for example, to identify a deceased person or determine the cause of death. We may also release health and service information to funeral directors, as necessary to carry out their duties.
- **Organ and Tissue Donation.** If you are an organ donor, we may release your health and service information to organizations that handle organ procurement or organ, eye, or tissue transplantation or to an organ donation bank, as necessary to facilitate organ or tissue donation and transplantation.
- **Lawsuits and Disputes.** If you are involved in a lawsuit or a dispute, we may disclose health and service information about you in response to a court or administrative order. We may also disclose health and service information about you in response to a court subpoena, discovery request, or other lawful process by

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someone else involved in the dispute, but only if efforts have been made to tell you about the request or to obtain an order protecting the information requested.

- **Law Enforcement.** We may release health and service information if asked to do so by a law enforcement official:
 - In response to a court order, subpoena, warrant, summons or similar process;
 - To identify or locate a suspect, fugitive, material witness, or missing person;
 - About the victim of a crime if, under certain limited circumstances, we are unable to obtain the person's agreement;
 - About a death we believe may be the result of criminal conduct;
 - About criminal conduct at Catholic Charities; and
 - In emergency circumstances to report a crime; the location of the crime or victims; or the identity, description or location of the person who committed the crime.
- **National Security and Intelligence Activities.** We may release health and service information about you to authorized federal officials for intelligence, counterintelligence, and other national security activities authorized by law.
- **Protective Services for the President and Others.** We may disclose health and service information about you to authorized federal officials so they may provide protection to the President, other authorized persons or foreign heads of state or conduct special investigations.
- **Inmates.** If you are an inmate of a correctional institution or under the custody of a law enforcement official, we may release health and service information about you to the correctional institution or law enforcement official. This release would be necessary (1) for the institution to provide you with health care; (2) to protect your health and safety or the health and safety of others; or (3) for the safety and security of the correctional institution.
- **Sale of Information.** Your authorization would be required for any sale of your health and service information.

YOUR RIGHTS REGARDING MEDICAL INFORMATION ABOUT YOU.

You have the following rights regarding health and service information we maintain about you:

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- **Right to Inspect and Copy.** You have the right to inspect and copy health and service information that may be used to make decisions about your care. Usually, this includes service and billing records, but does not include psychotherapy notes. If the requested information is maintained electronically, you have the right to request an electronic copy of the information.

To inspect and copy health and service information that may be used to make decisions about you, you must submit your request in writing to Catholic Charities' Chief Operating Officer (Privacy Officer) located at 702 S. High Point Road, Ste. 201, Madison, WI 53719. If you request a copy of the information, we may charge a fee for the costs of copying, mailing or other supplies associated with your request.

We may deny your request to inspect and copy in certain very limited circumstances. If you are denied access to service information, you may request that the denial be reviewed. Certain denials, however, are not subject to review. If the denial is subject to review, a licensed health care professional chosen by Catholic Charities will review your request and the denial. The person conducting the review will not be the person who denied your request. We will comply with the outcome of the review.

- **Right to Amend.** If you feel that health and service information we have about you is incorrect or incomplete, you may ask us to amend the information. You have the right to request an amendment for as long as the information is kept by or for Catholic Charities.

To request an amendment, your request must be made in writing and submitted to Catholic Charities' Chief Operating Officer (Privacy Officer) located at 702 S. High Point Road, Ste. 201, Madison, WI 53719. In addition, you must provide a reason that supports your request.

We may deny your request for an amendment if it is not in writing or does not include a reason to support the request. In addition, we may deny your request if you ask us to amend information that:

- Was not created by us, unless the person or entity that created the information is no longer available to make the amendment;
- Is not part of the health and service information kept by or for Catholic Charities;
- Is not part of the information which you would be permitted to inspect and copy; or
- Is accurate and complete.

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If we deny your request, you have the right to file a statement of disagreement with us and any future disclosures of the disputed information will include your statement.

- **Right to an Accounting of Disclosures.** You have the right to request an “accounting of disclosures” of your health and service information from Catholic Charities. This is a list of disclosures we have made of health and service information about you either as permitted or required by law. The “accounting” does not include certain types of disclosures, such as disclosures for the purposes of Catholic Charities’ treatment (service delivery), payment, or health care operations; disclosures made because you provided written authorization; disclosures made to you; disclosures made to your friends or family in your presence or because of an emergency; disclosures for national security purposes; disclosures incidental to otherwise permissible disclosures;
- To request this list or accounting of disclosures, you must submit your request in writing to Catholic Charities’ Chief Operating Officer (Privacy Officer) located at 702 S. High Point Road, Ste. 201, Madison, WI 53719. Your request must state a time period which may not be longer than six years. Your request should indicate in what form you want the list (for example, on paper, electronically). The first list you request within a 12 month period will be free. For additional lists, we may charge you for the costs of providing the list. We will notify you of the cost involved and you may choose to withdraw or modify your request at that time before any costs are incurred.
- **Right to Request Restrictions.** You have the right to request a restriction or limitation on the health and service information we use or disclose about you for treatment, payment or health care operations. You also have the right to request a limit on the health and service information we disclose about you to someone who is involved in your care or the payment for your care, like a family member or friend. For example, you could ask that we not use or disclose information about a counseling episode you had.

We are not required to agree to your request. The only exception to this is where you request a restriction on disclosures to your health plan in regard to information about a health care item or service that the health plan did not pay for (e.g., where you paid for the item or service out of pocket). In such a case, we are required to agree to the request, provided it relates to disclosure for purposes of payment or health care operations and disclosure is not otherwise required by law. If we do agree to a requested restriction, we will comply with your request unless the information is needed to provide you emergency treatment.

To request restrictions, you must make your request in writing to Catholic Charities’ Chief Operating Officer (Privacy Officer) located at 702 S. High Point Road, Ste. 201, Madison, WI 53719. In your request, you must tell us (1) what information you want to limit; (2) whether you want to limit our use,

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disclosure or both; and (3) to whom you want the limits to apply, for example, disclosures to your spouse.

- **Right to Request Confidential Communications.** You have the right to request that we communicate with you about health and service matters in a certain way or at a certain location. For example, you can ask that we only contact you at work or by mail.

To request confidential communications, you must make your request in writing to Catholic Charities' Chief Operating Officer (Privacy Officer) located at 702 S. High Point Road, Ste. 201, Madison, WI 53719. We will not ask you the reason for your request. We will accommodate all reasonable requests. Your request must specify how or where you wish to be contacted.

- **Right to a Paper Copy of This Notice.** You have the right to a paper copy of this notice and Catholic Charities will provide one to you at the time of your first in-person contact. You may ask us to give you a copy of this notice at any time. Even if you have agreed to receive this notice electronically, you are still entitled to a paper copy of this notice.

To obtain a paper copy of this notice, contact:

Chief Operating Officer (Privacy Officer)
Catholic Charities
702 S. High Point Road, Ste. 201
Madison, WI 53719

CHANGES TO THIS NOTICE

We reserve the right to change this notice. We reserve the right to make the revised or changed notice effective for health and service information we already have about you as well as any information we receive in the future. We will post a copy of the current notice in all of Catholic Charities' service locations. We will also post the notice on our website. The notice will contain on the first page, in the top right-hand corner, the effective date. In addition, each time you register at or are admitted to Catholic Charities for services, you may request a copy of the current notice in effect.

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COMPLAINTS

If you believe your privacy rights have been violated, you may file a complaint with Catholic Charities or with the Secretary of the Department of Health and Human Services. **You will not be penalized for filing a complaint.**

To file a complaint with the Secretary of the U.S. Department of Health and Human Services (HHS), you can contact the Region V Office for Civil Rights:

Office for Civil Rights
U.S. Department of Health and Human Services
233 N. Michigan Ave., Suite 240
Chicago, IL 60601
Voice Phone (800) 368-1019
FAX (312) 886-1807
TDD (800) 537-7697

Additional information regarding how to file a complaint with HHS can be found on their website: <http://www.hhs.gov/ocr/privacy/hipaa/complaints/index.html>.

To file a complaint with Catholic Charities, please submit your complaint in writing to:

Chief Operating Officer (Privacy Officer)
Catholic Charities
702 S. High Point Road, Ste. 201
Madison, WI 53719

If you have questions regarding filing a complaint with Catholic Charities, please contact Vice President (Privacy Officer) by phone at (608) 821-3100 or in writing at the address provided above. *All complaints filed with Catholic Charities must be submitted in writing.*

OTHER USES OF HEALTH AND SERVICE INFORMATION.

Other uses and disclosures of health and service information not covered by this notice or the laws that apply to us will be made only with your written authorization (permission). If you provide us with written authorization to use or disclose health and service information about you, you may revoke that authorization, in writing, at any time. If you revoke your authorization, we will no longer use or disclose health and service information about you for the reasons covered by your written authorization. Please understand that we are unable to take back any disclosures we have already made with your permission, and that we are required to retain our records of the care that we provided to you.