



HIPAA 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.

This Notice of Privacy Practices describes how AWARE may use and disclosure your protected health information to carry out treatment, payment, or health care operations and for other purposes permitted or required by law. It also describes your rights to access and control your protected health information. Protected health information is information about you including demographic information that may identify you and that relates to your past, present, or future physical or mental health and related health care services.

If you have any questions about this Notice, please contact the HIPAA Compliance Officer or the Quality Improvement Department at 406.563.8117.

This Notice is effective as of: July 8, 2020

AWARE's Commitment Regarding Your Personal Health Information:

AWARE is committed to maintaining and protecting your protected health information (PHI) in a HIPAA compliant manner. This Notice of Privacy Practices applies to all services provided by AWARE that are required to comply with HIPAA. AWARE is required to provide you with this Notice at the time of admission unless admission is done in a crisis or emergency situation.

AWARE's Obligations to you:

We are required by law to:

- Maintain the privacy and security of your PHI.
- Provide you with a copy of this notice of our legal obligations and privacy practices regarding health information about you.
- Comply with our current Privacy Practices.
- Notify you promptly if a breach occurs that may have compromised the privacy or security of you PHI.
- To not use or share your PHI other than as described here unless you tell us we can in writing. If you tell us we can share your information, you may change your mind at any time. Let us know in writing if you change your mind.

How We May Use and Disclose Your Health Information:

Below are examples of how AWARE may use and disclose PHI without authorization for certain purposes, such as treatment, payment, and health care operations. The following examples of these uses and disclosures are not meant to be exhaustive but are included to give you an idea of when your PHI could be disclosed.



- **Treatment:** AWARE may use and disclose your PHI for treatment related services. For example, AWARE may disclose PHI to other health providers involved in your treatment that need the information to ensure adequate care is provided.
- **Payment:** AWARE may use and disclose your PHI to 3rd party insurance companies in order to receive payment for services provided.
- **Health Care Operations:** AWARE may use and disclose your PHI for health care operations to operate our office ensuring you receive quality care. For example, we may share your information with our Quality Improvement Department to make sure the care you are receiving is of the highest quality.

- Other Uses and Disclosures:

- AWARE may also use and disclose your PHI without authorization for the following purposes:
 - AWARE may disclose PHI as required by law. An example of this would be reporting cases of suspected child abuse or neglect.
 - AWARE may use or disclose PHI to Business Associates that are also required to comply with HIPAA.
 - AWARE may disclose PHI due to public health risks. Disclosure may occur to prevent or control disease, injury or disability, report deaths, or medication reactions.
 - AWARE may disclose your PHI for regulatory compliance activities such as licensure reviews by the State of Montana Department of Health and Human Services and Commission on Accreditation of Rehabilitation Facilities surveys.
 - AWARE may disclose your PHI in the event of data breach notification requirements.
 - AWARE may disclose your PHI in response to a subpoena, discovery request, or other lawful process related to any judicial or administrative proceeding.
 - AWARE may disclose PHI when requested by law enforcement if it is required by law; the information is in response to a court order, subpoena, warrant, summons or similar legal process; limited information necessary to identify or locate a suspect, fugitive, material witness, or missing person; about the victim of a crime; about a death believed to be the result of a crime; criminal behavior on AWARE owned property; and in an emergency to report a crime.
 - AWARE may disclose PHI to coroners, medical examiners, and funeral directors to identify a deceased person and to determine the cause of death.
 - AWARE may use your PHI for research under certain circumstances. For example, PHI may be used for a research project comparing individuals who received one treatment to those who received another treatment. All research projects at AWARE must have the approval of the Medical Director.
 - AWARE may send you appointment reminders per the Communication Consent Agreement. AWARE may also use your PHI to identify and present other treatment options that may be beneficial to you.
 - AWARE may disclose your PHI to respond to organ and tissue donation requests.



- AWARE may disclose your PHI to comply with laws relating to Workers' Compensation or other similar programs established by law.

Uses and Disclosures that Requires AWARE to Give You an Opportunity to Object

We may disclose PHI to a member of your family, a relative, or close friend, identified by you, unless you object, if AWARE determines the disclosure is in your best interest based on our professional judgement.

AWARE may disclose your PHI during a disaster to relief organizations seeking information to coordinate care or notify families of your location or condition in a disaster unless you choose to opt out.

Your Written Authorization is Required for Other Uses and Disclosures

AWARE will obtain your written authorization for use and disclosure of your PHI for marketing purposes, those which constitute a sale of your PHI, and most sharing of psychotherapy notes.

Your Health Information Rights

- You have the right to inspect and request a copy of your PHI and billing information in writing. You may be charged a reasonable fee for copying and mailing your request. AWARE has up to 30 days to provide you with the requested information.
- You have the right to an electronic copy of your medical records.
- You have the right to be notified upon a breach of any of your unsecured PHI.
- You have the right to request an amendment of your PHI and billing information in writing.
- You have the right to request a list of certain disclosures of PHI AWARE has made for purposes other than treatment, payment, health care operations, and certain other disclosures (such as any you asked us to make).
- You have the right to request confidential communications of your PHI.
- You have the right to request a restriction or limitation on the PHI we use or disclose for treatment, payment, or health care operations. You also have a right to limit the PHI disclosed.
- You have the right to request AWARE not bill your insurance company when services are paid for out-of-pocket.
- You have the right to receive a copy of this notice.
- You have the right to agree or object to the disclosure of PHI to a family member, legal guardian, or close personal friend of the patient, to the extent the PHI is relevant to the individual's involvement in the patient's care or payment related to that care. If you are not able to agree or object due to your incapacity or an emergency circumstance, health professionals, using their best judgment, will decide whether a limited disclosure related to your care of the patient is in the best interests of you.



- You have the right to file a complaint if you feel your rights are violated using the information below.
- You have the right to agree or object to participation in a facility directory. Note: AWARE does not utilize a facility directory.

AWARE reserves the right to make changes to this notice. AWARE reserves the right to make the revised or changed notice effective for PHI we already have about you as well as any information we receive in the future. AWARE will post a copy of current notices in each facility that will contain an effective date of the notice. In addition, each time you register at or are admitted to AWARE for treatment or health care services, we will offer you a copy of the current notice in effect. AWARE may also revise its policy and procedures regarding the use and disclosure of PHI at any time, which could subsequently result in additional uses or disclosures that would not require an individual's authorization.

Filing a Complaint

If you believe your privacy rights have been violated, you may file a complaint with AWARE's HIPAA Compliance Officer or Quality Improvement Department. Complaints must be made in writing.

Send complaints to AWARE, Attn: HIPAA Compliance Officer, 205 E. Park Ave., Anaconda, MT 59711.

You also have the right to file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting www.hhs.gov/ocr/privacy/hipaa/complaints/.

AWARE will not retaliate against you for filing a complaint.