

**OZARK GUIDANCE CENTER, Inc.**  
**Notice of Privacy Practices**

We have worked hard over the years to safeguard client information and build an outstanding reputation for confidentiality. Significant time, financial resources and personnel have been and will continue to be devoted by Ozark Guidance Center, Inc. (Ozark Guidance) to the protection of privacy of our clients. The only thing that receives more attention than client privacy at Ozark Guidance is the quality of healthcare services we provide.

*This notice describes how health information about you may be used and disclosed; and how you can obtain access to this information~ Please read this notice carefully. If you have questions about our privacy practices or your health information, you are strongly encouraged to discuss them with your therapist or our Privacy Officer and Manager of Medical Records, Tamara Chaney at (479) 750-2020.*

**Your Medical Record**

We maintain a medical record for each client that includes information about behavioral healthcare needs, the services we provide, test and evaluation results, plus other relevant information we need in order to provide quality healthcare services. We will compile and maintain a medical record on you, using it: (1) to assist us and other healthcare professionals in providing you care and treatment; (2) to document and communicate to others a detailed description of the care you have received, and the status of your behavioral health; (3) to assist you, your insurer or other third-party payer in paying for healthcare services; (4) to meet a variety of legal obligations, some of which require us to communicate with third parties; and (5) to assist in training and other operational functions that help us maintain the highest standards of care.

**You Have Important Controls Over Your Medical Record**

You have specific privacy rights that protect the confidentiality of your health information. You are also entitled to access your medical record, so long as your health and safety are not jeopardized. We believe that, if you understand your privacy rights, you can be more involved in all phases of your healthcare, including decisions about how to best protect the accuracy and confidentiality of your health information. You have the right:

- to discuss the contents of your medical record with us;
- to inspect and obtain a paper copy of your medical record;
- to request that restrictions be placed on the disclosure of your health information;
- to request communication of your health information to alternate locations or by alternate means;
- to request an amendment to your medical record;
- to obtain an accounting of disclosures of your health information, except when made for certain purposes;
- to restrict certain future disclosures of health information by revoking a prior authorization;
- to appeal any action or decision pertaining to your health information; and
- to receive, upon request, a copy of our most current **Notice of Privacy Practices**.

**Our Responsibilities and Practices**

We are required by law, as well as by our own professional ethics to maintain the privacy and security of your protected health information. This notice is intended to give you an accurate understanding of Ozark Guidance's legal responsibilities and privacy practices, including but not limited to:

- maintaining policies and practices that protect the privacy of your health information;
- securing your electronic records from premature destruction and unauthorized disclosure;
- accommodating your reasonable requests to restrict access;
- complying with your reasonable requests to use alternate means of communications or to direct correspondence to specified locations;
- notifying you when we are unable to agree to a requested restriction, amendment or appeal pertaining to your medical record; and
- abiding by the privacy practices described in this notice, until the law changes or this notice is amended.

**Examples of our Privacy Practices include the following:**

**Emergencies:** We use and disclose health information in a manner that is most likely to protect or stabilize the individual. Privacy is not a high priority during an emergency situation.

**Referrals:** We release client information to referring physicians without a signed authorization from the client, but only for the purposes of confirming a scheduled appointment or verifying that the client kept the appointment.

**Treatment:** We use and disclose a client's health information for our own treatment purposes as we deem appropriate under professional standards for quality and timeliness of care. Use and disclosure of your health information may occur when we order tests, make referrals, call-in prescriptions, or involve other healthcare personnel employed or contracted for by Ozark Guidance. For most other treatment-related uses and disclosures, we require a signed authorization by the client, though some incidental, informal disclosure to outside healthcare professionals may be unavoidable.

**Payment:** We use and disclose client information in order to obtain payment for services. Sometimes, we also provide information to other healthcare providers so that they can receive payment for services provided to you.

**Operations:** To ensure the on-going quality of care and efficient service delivery to all our clients, we employ a variety of internal processes, programs, reviews, and controls. These often require that our clinical and business personnel access and use a client's health information.

**Business Associates:** On a limited basis, we use external parties to assist us with treatment, payment and healthcare operational functions. We require our business associates to protect the privacy of client information and exercise the same high standards of confidentiality that we do when handling your medical records.

**Routine Communications:** We must communicate with our clients in an effective, timely manner. The following are general guidelines on how we handle routine communications issues: • sometimes we must use telephone messages, voice mail, answering machines, or letters; • when, as a result of attempting to reach you, we come into contact with a spouse, family member or friend, we generally identify the name of the employee making the call, our telephone number, appointment date/time, but little else; • we do communicate certain health information, provided it is in the client's best interest, to an authorized third party representative or to the parents of a minor; and • in all other situations, we usually require the client's authorization before releasing health information to family members or friends. It is essential that you tell us if certain individuals or means of communicating are unacceptable to you.

**Legal:** There are several areas where we might be required by law, law enforcement, courts, public health agencies, regulators, or in the interest of public or private safety to release some or all of a client's health information, whether or not the client authorizes it.

**Authorizations:** For most other releases of information, we will require a signed authorization by the client before we provide a third-party with individually identifiable health information.

**Research Practices:** Under certain circumstances, we may use or disclose client health information for research purposes. Before agreeing to conduct research, Ozark Guidance carefully reviews how the project is expected to improve the quality of services we provide our clients. If the project meets our strict standards, qualifying clients will be informed of the project and their opportunity to participate by an authorization form, except in those rare circumstances when the authorization requirement is waived. To the extent practical, we protect the identity of the client participating in a research project.

**Minimum:** Even though we can lawfully use and disclose client information under a variety of circumstances, we always try to limit the use or disclosure to the minimum necessary. However, where matters of care or treatment are concerned, our priority is to disclose all information that is remotely relevant to the client's health.

**Changes in Our Privacy Practices**

We reserve the right to change our privacy practices in the future and to make those changes applicable to all client health information, including that compiled before the effective date of the change. When we make a change in our privacy practices, it will be posted in our waiting room and on our website at [www.ozarkguidance.org](http://www.ozarkguidance.org). We will also attempt to provide you with a revised copy of this document on the next service delivery date or by mail, whichever is more practical.

**Complaints About How Your Health Information is Used and Disclosed**

You have the right to file a complaint, if you believe that our use or disclosure of your protected health information violates the law or does not comply with our Privacy Practices in effect at the time of the event in question. You may contact our Privacy Officer Tamara Chaney (479) 750-2020. We will accept both written and oral complaints for prompt review. No client shall be retaliated against for filing a complaint or exercising any privacy right pertaining to his or her health information. You may also choose to file a complaint with the Secretary of the U.S. Department of Health and Human Services.

**The Effective Date: April 14, 2003: Revision September 12, 2007**