

Notice of Privacy Practices for Consumer Confidential Information Effective September 19, 2003

This notice describes how medical and other confidential information about you may be used and disclosed and how you can see this information.

Please review carefully.

It is your responsibility to provide relevant information as a basis for receiving services and participating in service decisions.

What information might be in my case record?

Each time Bethany Christian Services provides a service, additions are made to your record. This information helps coordinate your care or service with our staff as well as other professionals who help provide services or care to you. It also is a legal document describing the care or services that you receive and helps us determine if we are providing appropriate services to you.

May I see my information?

You may see the information that we have about you. You must tell us by filling out an authorization form. We reserve the right to charge you for copies of your record.

May I change my record?

If you think the information in your record is wrong, you may send a written request that we amend or add new information. Your request may also include that we amend your record that we may have sent to another provider.

May I restrict how you use my information?

You may ask us to limit the use of your information, but we do not have to agree if the information is to help treat you. You may also ask that we send information to you in a different format or to a different location

When does Bethany share my information?

We keep and share information to coordinate treatment, payment and agency operations. We may share information to:

- Determine if treatment is appropriate;
- Pay for services from health care providers;
- Evaluate the quality of care you receive from providers;
- Contact you with appointment reminders;
- Send you agency information such as newsletters or updates to our services;
- Determine that we are providing quality services on your behalf.

What if someone else needs my information?

You may be asked to sign an authorization form allowing your information to be share if:

- Bethany needs to send the information to other places;
- You want us to send information to another agency or provider;
- You want information sent to another person such as your attorney, a relative or other representative.

Your permission to share your information is effective until the date you put on the authorization form. We can only share the information you list. You may withdraw or change this permission in writing.

May confidential information be shared without my permission?

Yes, there are times when confidential information may be shared without your permission. By law, we are at times required or allowed to share confidential information about you, even if you do not give us permission. Some of these situations are:

- Reporting incidents of child or adult abuse or neglect to the police or other appropriate agency;
- Providing records when ordered to do so by the court or for our own legal protection;
- Giving information to other agencies who review Bethany operations;
- Sharing information with government agencies that review Bethany operations;
- Sharing information with government agencies that license and contract with us to provide services;
- Disclosing information to public health authorities law enforcement or correctional facilities as permitted by law;
- If you are a danger to yourself or others;
- In the event of a medical emergency;

- Giving certain information to parents or guardians of minors;
- Sharing information with companies we contract with to provide services on our behalf.

However, no information will be shared outside the scope of this notice without requiring your written authorization.

What are additional rights given to me by Bethany Christian Services?

The right to be treated with dignity and respect.

The right to voluntarily withdraw from service at any time.

The right to work with your service provider in developing an individualized plan of service that is best suited to your needs.

The right to have communication with your worker and to have your case records confidentially held by the service agency. This communication will not be released to another party without your written consent except where allowed by state and federal law and agency protocol.

The right to review your record.

The right not to be photographed, recorded, or videotaped without your written consent.

The right to know that Bethany Christian Services will abide by all applicable state and federal laws.

The right to know that, as child welfare and healthcare providers and professionals, we are mandatory reporters and must report threat of harm to self or others to the proper authorities.

The right to file a complaint with the agency's recipient rights advisor and/or your State Department of Commerce, Complaint and Allegation Division, regarding the services you received.

I have questions about my rights. Who do I contact?

If you have questions and would like additional information, you may contact your Recipient Rights Officer at your local office or Mary Godfrey, Privacy Officer for Bethany Christian Services, at 616-224-7610.

How do I report a violation of my rights or file a grievance with the agency?

You can file a complaint or grievance with your local branch representative:

OR

Mary Godfrey, Privacy Officer
Bethany Christian Services
PO Box 294
Grand Rapids, MI 49501-0294

OR

The Secretary,
Department of Health and Human Services (DHHS)
2000 Independence Avenue
Washington, D.C. 20201

Any complaints made to DHHS must be made within 180 days of the privacy violation.

You will not lose the opportunity for services if you file a complaint. You also may request additional information on the steps Bethany will take when we receive your complaint, which outlines the timeframes and information needed from you.

Bethany's Responsibilities

This organization is required to:

- Maintain the privacy of your health information
- Abide by the terms of this notice
- Notify you if we are unable to agree to a requested restriction
- Accommodate reasonable requests you may have to communicate health information by alternative means or at alternative locations.

We reserve the right to change our practices and to make the new changes effective for all protected health information we maintain. Should our privacy practices change, we will post the change on our website and make paper copies available in our offices.

We will not use or disclose your health information without your authorization except as described in this notice.

May I have a copy of this notice?

This copy is yours to keep. If you saw this notice on our website, you may ask for a paper copy and we will provide one for you.

What happens if this notice changes?

We will update any changes to our notice on our website as well as make paper copies available in our offices for you to request a copy.