

Alexey Tolchinsky, Psy.D.

11303 Amherst Ave., Suite 1,
Silver Spring, MD, 20902
Rockville, MD

847-E Quince Orchard Boulevard
Gaithersburg, MD 20878

Tel: (301) 919-9259 Fax: (301) 933-0118

Notice of Privacy Practices – Full Version

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.

Privacy is a very important concern for all those who come to this office. It is also complicated because of federal and state laws and my professional ethical codes. Because the rules are so complicated some parts of this Notice are quite detailed and you probably will have to read them several times to understand them. If you have any questions, I will be happy to help you.

Contents of this Notice

- A. Introduction – To Patients
- B. What I mean by your medical information
- C. Privacy and laws about privacy
- D. How your protected health information can be used and shared
 - 1. Uses and disclosures *with your* consent
 - a) The basic uses and disclosures – For treatment, payment, and health care operations (TPO)
 - b) Other uses and disclosures in health care
 - 2. Uses and disclosures *requiring your* authorization
 - 3. Uses and disclosures *not requiring your* consent or authorization
 - 4. Uses and disclosures requiring you to have an *opportunity to object*
 - 5. An *Accounting* of disclosures I have made

E. If you have questions or problems

A. Introduction – To Patients

This notice will tell you about how I handle information about you. It tells how I use this information here in this office, how I share it with other professionals and organizations, and how you can see it. I want you to know all of these so that you can make the best decisions for yourself and your family. Also, I am required to tell you about this because of the privacy regulations of a federal law, the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Because this law and the laws of this state are very complicated and I don't want to make you read a lot that may not apply to you, I have simplified some parts. If you have any questions or want to know more about anything in this Notice, please ask me for more explanation or more details.

B. What I mean by your medical information

Each time you visit any doctor's office, hospital, clinic, or any other "healthcare provider", information is collected about you and your physical and mental health. It may be information about your past, present or future health or conditions, or the treatment or other services you got from myself or from others, or about payment for healthcare. The information I collect from you is called, in the law, PHI, which stands for Protected Health Information. This information goes into your medical or healthcare record or file at the office. In this office, the PHI is likely to include these kinds of information:

- Your history. As a child, in school and at work, and marital and personal history.
- Reasons you came for treatment. Your problems, complaints, symptoms, needs, goals.
- Diagnoses. Diagnoses are medical terms for your problems and symptoms.
- A treatment plan. These are the treatments and other services, which I think will best help you.
- Progress notes. Each time you come in I write down some things about how you are doing, what I observe about you, and what you tell me.
- Records I get from other who treated you or evaluated you.
- Psychological test scores, school records, etc.
- Information about medications you are taking.
- Legal matters
- Billing and insurance information

This list is just to give you a general idea and there may be other kinds of information that go into your healthcare record here.

I use this information for many purposes. For example, I may use it:

- To plan your care and treatment
- To decide how well my treatment is working for you.
- When I talk with other healthcare professionals who are also treating you such as your family doctor or the professional who referred you to me.
- To show that you actually received services from me, which I billed to you or your health insurance company.
- For teaching and training other healthcare professionals.
- For medical or psychological research.
- For public health officials trying to improve health care in this country.

- To improve the way I do my job by measuring the results of our work.

When you understand *what* is in your record and what it is used for can make better decisions about who, when, and why others should have this information.

Although your health record is the physical property of the healthcare practitioner or facility that collected it, the information belongs to you. You can inspect, read, or review it. If you want a copy, I can make one for you but will charge you for the costs of copying (and mailing if you want it mailed to you). In some very unusual situations you cannot see all of what is in your records. If you find anything in your records that you think is incorrect or something important is missing you can ask me to amend (add information to) your record although in some rare situations I don't have to agree to do that. If you need further explanation, please ask me.

C. Privacy and the laws

The HIPPA laws requires that I keep your PHI private and to give you this Notice of my legal duties and our privacy practices, which is called the **Notice of Privacy Practices** or **NPP**. I will follow the rules of this notice as long as it is in effect but if I change it, the rules of the new NPP will apply to the entire PHI I keep. If I change the NPP in any material way, I will provide the new NPP to you if you are currently in treatment.

D. How your protected health information can be used and shared

When your information is read by others or me in this office that is called, in the law, **“use”**. If the information is shared with or sent to others outside this office, that is called, in the law, **“disclosure”**. Except in some special circumstances, when we use your PHI here or disclose it to others we share only the **minimum necessary** PHI needed for the purpose. The law gives you right to know about your PHI, how it is used and to have a say in how it is disclosed and so I will tell you more about what we do with your information.

We use and disclose PHI for several reasons. Mainly, we will use and disclose (share) id for routine purposes and I will explain more about these below. For other uses I must tell you about them and have a written authorization from you unless the law lets or requires that I make the use or disclose without your authorization. However, the law also says that I am allowed to make some uses and disclosures without your consent or authorization.

1. Uses and disclosures of PHI in healthcare *with your consent*

After you have read this notice you will be asked to sign a separate **Consent form** to allow us to use and share your PHI. In almost all cases we intend to use your PHI here or share your PHI with other people or organizations to provide **treatment** to you, arrange for **payment** for our services, or some other business functions called healthcare **operations**. Together these routine purposes are called TPO and the Consent form allows us to use and disclose your PHI or TPO.

1a. For treatment, payment, or healthcare operations

I need information about you and your condition to provide care to you. You have to agree to let me collect the information and use it and share it as necessary to care for you properly. Therefore you must sign the Consent form before I begin to treat you because if you do not agree and consent I cannot treat you.

When you come to see me, a couple of people in my office may collect information about you and all of it may go into your healthcare records here. Generally, we may use or disclose your PHI for three purposes: treatment, obtaining payment, and healthcare operations. These are explained below:

For treatment

I use your medical information to provide you with psychological treatments or services. These might include individual, family, or group therapy, assessment services, treatment planning, or measuring the effects of my services.

For payment

We may use your information to bill you, your insurance, or others to pay for the treatment I provided you. We may contact your insurance company to check on exactly what your insurance covers. We may have to tell them about your diagnoses, what treatment you have received, and what we expect as I treat you. We will need to tell them about when we met, your progress, and other similar things.

For healthcare operations

There are some other ways we may use or disclose your PHI, which are called healthcare operations. For example, I may use your PHI to see where I can make improvements in the care and services I provide. I may be required to supply some information to some government health agencies so they can study disorders and treatment and make plans for services that are needed. If I do, your name and identity will be removed from what I send.

1b. Other uses in healthcare

Appointment reminders. I may use and disclose medical information to reschedule or remind you of appointments for treatment of other care. If you want me to call or write to you only at your home or your work or prefer some other way to reach you, I usually can arrange that. Simply inform me of your preference.

Treatment Alternatives. I may use and disclose your PHI to tell you about or recommend possible treatment or alternatives that may be of interest to you.

Other Benefits and Services. I may use and disclose your PHI to tell you about health-related benefits and services that may be of interest to you.

Research. I may use or share your information to do research to improve treatments. For example, comparing two treatments for the same disorder to see which works better or faster or costs less. In all cases your name, address and other information that reveals who you are will be removed from the information given to researches. If they need to know who you are, I will discuss the research project with you and you will have to sign a special authorization form before any information is shared.

Business Associates. There are some jobs I hire other businesses to do for me. They are called our Business Associates in the law. Examples include a copy service we use to

make copies of your health record and a billing service who figures out, prints, and mails our bills. These business associates need to receive some of your PHI to do their jobs properly. To protect your privacy they have agreed in their contract with us to safeguard your information.

2. Uses and disclosures requiring *your authorization*

If I want to share or disclose your PHI to others who provide treatment to you. Because Maryland law treats the psychologist-patient communication as confidential, I will need your authorization to do this. If other professionals are treating you, I may ask for your permission to share some of your PHI with them so that the services you receive will be coordinated. I may refer you to other professionals or consultants for services I cannot offer such as special testing or treatments. When I do this, I may ask your permission to tell them some things about you and your conditions. I will receive their findings and opinions and those will go into your records here. If you receive treatment in the future from other professionals, I can also share your PHI with them if you provide permission. These are some examples so that you can see how we may ask for your permission to use and disclose your PHI for treatment.

If I have your authorization to use or disclose your PHI, you can revoke (cancel) that permission, in writing, at any time. After that time I will not use or disclose your information for the purposes we agreed to. Of course I cannot take back any information I had already disclosed with your permission or that we had used in our office.

3. Uses and disclosures of PHI from mental health records not requiring *Consent or Authorization*

The laws allow me to use and disclose some of your PHI without your consent or authorization in some cases.

When required by law

There are some federal or state laws, which require that I disclose PHI.

- I have to report suspected child abuse or neglect, or that suspected abuse of a vulnerable adult.

If you have been involved in a lawsuit or legal proceeding and I receive a subpoena, discovery request, or other lawful process I may have to release some of your PHI. I will only do so after trying to tell you about the request, consulting your lawyer, or trying to get a court order to protect the information they requested.

I have to release (disclose) some information to the government agencies which check to see that I am obeying the privacy laws.

- To prevent a Serious Threat to Health or Safety

If I come to believe that there is a Serious threat to your health or safety or that of another person or the public I can disclose some of your PHI. I will only do this to persons who can prevent the danger.

4. Uses and disclosures requiring you to have an opportunity to object

I may want to share some information about you with your family or close others. I will only share information with those who are involved in your care and anyone else you choose such as close friends or clergy. I will ask you whom you want me to tell what information about your condition or treatment. You can tell me what you want and I will honor your wishes as long as it is not against the law.

If it is an emergency and I do not have the opportunity to contact you, I can share information if I believe that it is what you would have wanted and if I believe it will help you if I do share it. If I share information, in an emergency, I will tell you as soon as I can. If you don't approve I will stop, as long as it is not against the law.

5. An accounting of disclosures

When I disclose your PHI I keep some records of to whom I sent it to, when I send it, and what I sent. You can get an accounting (a list) of many of these disclosures.

E. If you have questions or problems

If you need more information or have questions about the privacy practices described above, please ask me. If you have a problem with how your PHI have been handled or if you believe your privacy rights have been violated, you have the right to file a complaint with me and with the Secretary of the Federal Department of Health and Human Services. I will not in any way limit your care here or take any actions against you if you complain.

The effective date of this notice is April 14, 2003.