

For More Information or to Report a Problem:

If you have questions and would like additional information, you may contact the *TLCS Privacy Officer*:

Katherine Warren
1507 21st Street, Suite 205
Sacramento, CA 95811

If you believe your privacy rights have been violated, you can file a complaint with the T.L.C.S. HIPAA Complaint Officer, or with the Office for Civil Rights, U.S. Department of Health and Human Services. There will be no retaliation for filing a complaint with either the TLCS HIPAA Complaint Officer or the Office for Civil Rights. The addresses are listed below:

TLCS HIPAA Complaint Officer:

Karen Brockopp
1507 21st Street, Suite 205
Sacramento, CA 95811

Office for Civil Rights:

U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Room 509F, HHH Building
Washington, D.C. 20201

Examples of Disclosures for Treatment, Payment and Health Operations

We will use your mental health information to provide quality services. For example, Information obtained by an intake worker will be recorded in your record and may be used as we determine the services we can offer.

Research: We may disclose unidentifiable information to researchers when their research has been approved by an institutional review board that has reviewed the research proposal and established protocols to ensure the privacy of your health information.

Fund raising: We may contact you as part of a fund-raising effort.

Public health: As required by law, we may disclose your health information to public health or legal authorities charged with preventing or controlling disease, injury, or disability.

Law enforcement: We may disclose health information for law enforcement purposes as required by law or in response to a valid subpoena.

Funding sources: We may disclose information to our contractors funding sources as per our contract.

Federal law makes provision for your health information to be released to an appropriate health oversight agency, public health authority or attorney, provided that a work force member or business associate believes in good faith that we have engaged in unlawful conduct or have otherwise violated professional or clinical standards and are potentially endangering one or more patients, workers or the public.

**NOTICE OF PRIVACY PRACTICES
FOR**

**Transitional Living
&
Community Support, Inc.**

1507 21st Street, Suite 205
Sacramento, CA 95814
(916) 441-0123

THIS NOTICE DESCRIBES HOW INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Introduction

At Transitional Living and Community Support (T.L.C.S.), we are committed to treating and using protected health information about you responsibly. This Notice of Health Information Practices describes the personal information we collect, and how and when we use or disclose that information. It also describes your rights as they relate to your protected health information. This Notice is effective 4-14-03 and applies to all protected health information as defined by federal regulations.

Understanding Your Health Record/Information

Each time you have a significant interaction with a T.L.C.S. staff person, a record of your visit is made. Typically, this record contains your goals and progress towards your goals. This information serves as a:

- Basis for our work together towards your goals in planning your care and treatment,
- Means of communication among the many health professionals who contribute to your care,
- Legal document describing the care you received,
- Means by which you or a third-party payer can verify that services billed were actually provided,

- A source of information for public health officials charged with improving the health of this state and the nation,
- A source of data for planning,
- A tool with which we can assess and continually work to improve the services we render and the outcomes we achieve.

Understanding what is in your record and how your health information is used helps you to: ensure its accuracy, better understand who, what, when, where, and why others may access your health information, and make more informed decisions when authorizing disclosures to others.

Your Health Information Rights

Although your health record is the physical property of T.L.C.S. the information belongs to you. You have the right to:

- Obtain a paper copy of this notice of information practices on request,
- Inspect and receive a copy of your health record as provided for in 45 CFR 164.524,
- Amend your health record as provided in 45 CFR 164.528,
- Obtain an accounting of disclosures of your health information as provided in 45 CFR 164.528,
- Request communications of your health information by alternative means or at alternative locations,
- Request a restriction on certain uses and disclosures of your information as provided by 45 CFR 164.522, and
- Revoke your authorization to use or disclose health information except to the extent that action has already been taken.

Our Responsibilities

T.L.C.S. is required to:

- Maintain the privacy of your health information,
- Provide you with this notice as to our legal duties and privacy practices with respect to information we collect and maintain about you,
- Abide by the terms of this notice,
- Notify you if we are unable to agree to a requested restriction, and
- 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 provisions effective for all protected health information we maintain. Should our information practices change, we will mail a revised notice to the address you've supplied us, or if you agree, we will email the revised notice to you.

We will not use or disclose your health information without your authorization, except as described in this notice. We will also discontinue to use or disclose your health information after we received a written revocation of the authorization according to the procedures included in the authorization.