Catholic Community Services Yuma
Counseling and Behavioral Health Services
Notice of Privacy Practices

THIS NOTICE INVOLVES YOUR PRIVACY RIGHTS AND DESCRIBES HOW INFORMATION ABOUT YOU MAY BE DISCLOSED, AND HOW YOU CAN OBTAIN ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

The confidentiality of client information and records is protected under Federal Regulations and State Law, according to the Health Insurance Portability and Accountability Act (HIPAA) “Final Rule, a federal law that provides privacy protections and patient rights about the use and disclosure of your Protected Health Information (PHI) for the purposes of treatment, payment, and health care operations. Generally, employees of CCS Yuma cannot confirm or deny that services are provided to you, unless: 1) your written consent is provided to CCS; 2) the disclosure is allowed by a court order; 3) the disclosure is made to medical personnel in a medical emergency, or to a qualified employee for audit or program evaluation.

Violation of Federal Regulations and/or State Laws by a treatment facility/provider is a crime. Suspected violations may be reported to appropriate authorities. However, Federal Regulations/State Law does not protect any information about a threat or crime committed by a client either at CCS Yuma or against any employee. In the event of a client’s death, the spouse or parents of a deceased client have a right to access their child’s or spouse’s records. Parents/Guardians of non-emancipated minor clients have the right to access the client’s records.

I. Confidentiality
As a rule, CCS Yuma will disclose no information about you, or the fact that you are receiving services, without your written consent. Your client record contains the dates of our sessions, your diagnosis, functional status, symptoms, prognosis and progress, and/or any reports. Health care providers are legally allowed to use or disclose records or information for treatment, payment, and health care operations purposes. However, CCS Yuma does not routinely disclose specific information relating to your prognosis or functional status and will require your permission in advance, through your written authorization at the time the need for disclosure arises. You may revoke your permission, in writing, at any time, by written request to CCS Yuma.

II. “Limits of Confidentiality”
Possible Uses and Disclosures of mental health records without Consent or Authorization
There are some important exceptions to this rule of confidentiality – some exceptions created voluntarily by CCS Yuma Policy, and some required by State law. If you wish to receive mental health services from CCS Yuma, you must sign this form indicating that you understand and accept our policies about confidentiality and its limits.

CCS Yuma and their Providers may use, disclose records or other information about you without your consent or authorization in the following circumstances, either by policy or because legally required:

- Emergency: If you are involved in a life-threatening emergency and your Provider cannot ask your permission, the agency will share information if it is believed you would have wanted us to do so, or if we believe it will be helpful to you.
- Child Abuse Reporting: If your Provider has reasonable suspicion to believe that a child is or has been abused, neglected or exploited, CCS Yuma is required by Arizona State Law to report the matter immediately to the Arizona Department of Child Services.
- Adult Abuse Reporting: If your Provider has reasonable suspicion to believe that an elderly or incapacitated adult is or has been abused, neglected or exploited, CCS Yuma is required by Arizona State Law to immediately make a report and provide relevant information to Arizona’s Adult Protective Services.
- Health Oversight: Licensed Professionals have a duty to report misconduct by another health care provider or a licensed professional. Also, per a Provider’s licensure (ARS 32-3283.A) and ethical standards, a report must be submitted to protect people by other health care providers or licensed professionals. By law, if you describe unprofessional conduct by another provider of any profession, your Provider is required to explain to you how to make such a report. If you are yourself a health care provider, your attending Provider is required by law to report to your licensing board that you are in treatment with me, if there is reasonable concern your condition places the public at risk. The Arizona’s State Licensing Boards have the power, when necessary, to subpoena relevant records in investigating a complaint of provider incompetence or misconduct.

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Client Name: ___________________________ Client ID: ___________________________
Effective Date: 02/2019
• Court Proceedings: If you are involved in a court proceeding and a request is made for information about your diagnosis and treatment and the records thereof, such information is privileged under State law, and **CCS Yuma will not release information unless you provide written authorization or a judge issues a court order.** If CCS Yuma receives a subpoena for records or testimony, your Provider will notify you, so you can determine if you want to file a motion to quash (block) the subpoena. However, while awaiting the judge’s decision, CCS Yuma is required to place said records in a sealed envelope and provide them to the Clerk of Court. A confidential relationship between a client and a licensee is the same as between an attorney and a client. Unless a client waives this privilege in writing or in court testimony, a licensee shall not voluntarily or involuntarily divulge information that is received by reason of the confidential nature of the behavioral health professional-client relationship (ARS 32-3283).

• Serious Threat to Health or Safety: Under Arizona law (ARS 32-3283.C.1 and ARS 32-3283.C.2), if you disclose to your Provider a specific and immediate threat to cause serious bodily injury or death, to an identified or to an identifiable person, and your Provider believes you have the intent and ability to carry out that threat immediately or imminently, CCS Yuma is legally required to take steps to protect third parties. These precautions may include:
  - 1) Warning the potential victim(s), or the parent or guardian of the potential victim(s), if under 18,
  - 2) Notifying law enforcement authority, or
  - 3) Seeking your hospitalization.

CCS Yuma may also use and disclose medical information about you when necessary to prevent an immediate, serious threat to your own health and safety. If you become a party in a civil commitment hearing, CCS Yuma may be required to provide your records to the court, your attorney or guardian ad litem, or a law enforcement officer, whether you are a minor or an adult.

• Records of Minors: The State of Arizona has a number of laws that limit the confidentiality of the records of minors. For example, parents, regardless of custody, may not be denied access to their child’s records. Other circumstances may also apply, and we will discuss these in detail if I provide services to minors. [For adolescents in psychotherapy, also see Adolescent Consent Form, to be signed by minor and parent]. A Client’s legal guardian may make treatment decisions on behalf of the client or not according to ARS 32-3283.D.1-3.

Other uses and disclosures of information not covered by this notice or by the laws that apply to me will be made only with your written permission.

### III. Patient’s Rights and Provider’s Duties

- **Right to Receive Confidential Communications by Alternative Means and at Alternative Locations —** You have the right to request and receive confidential communications of PHI by alternative means and at alternative locations. For example, you may not want a family member to know that you are seeing me. Upon your request, we can send your bills to another address. You may also request that we contact you at the contact number of your choice or not leave voice mail messages. To request alternative communication, you must make your request in writing, specifying how or where you wish to be contacted.

- **Right to a copy of this notice —** You have the right to a paper copy of this notice. You may ask CCS Yuma to give you a copy of this notice at any time. Changes to this notice: CCS Yuma reserves the right to change Policies and/or to change this notice, and to make the changed notice effective for medical information on file, as well as, any information received in the future. The notice will contain the effective date. A new copy will be given to you or posted in the waiting room. CCS Yuma will have copies of the current notice available on request.

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**Client's Acknowledgement of and Receipt of Notice of Privacy Practices**

I have been provided a copy of CCS Yuma’s “Notice of Privacy Practices.” We have discussed these polices and I understand that I may ask questions about them at any time in the future.

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**Printed Name of Client/Agent/Representative**  
**Signature**  
**Date**

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**Catholic Community Services Yuma Witness:**

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**Witness Printed Name, Position**  
**Signature**  
**Date**  
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**Client Name:**  
**Client ID:**  
**Effective Date:** 02/2019