

## Privacy Notice

Effective Date: April 14, 2003

### THIS NOTICE DESCRIBES HOW YOUR MEDICAL INFORMATION MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THAT INFORMATION

#### PLEASE REVIEW THIS NOTICE CAREFULLY

- Families First Agency includes all of its programs and sites where services are provided to individuals, children and families.
- In this notice, "you" refers to you, your child, and/or your family.

Families First Agency understands that medical information about your health is personal. We are committed to maintaining the privacy of your protected health information ("PHI"), which includes your medical and/or mental health condition and the care and treatment you receive from Families First. It may include family PHI as well. We create a record of the care and services you receive at Families First. We need this record to provide you with quality care and to comply with certain legal requirements. This Notice details how the PHI included in your record may be used and disclosed to third parties to carry out treatment, payment for your treatment, day-to day business activities (health care operations as defined below) of Families First, and for other purposes permitted or required by law. This Notice also details your rights regarding your PHI.

We are required to abide by the terms of this Notice of Privacy Practices. We may change the terms of our notice, at any time. The new notice will be effective for all PHI that we maintain at that time. Upon your request, we will provide you with any revised Notice of Privacy Practices by accessing our web site at [www.familiesfirst.org/resources](http://www.familiesfirst.org/resources) or calling (404-853-2800) and requesting that a revised copy be sent to you in the mail, e-mail, fax or asking for one at the time of your next appointment.

#### USE OR DISCLOSURE OF PHI

Families First Agency may use and/or share your protected health information (PHI/information) for treatment, payment for your treatment, and health care operations of Families First. Your protected health information may be used and shared by your service planner, other treatment team members and others outside of our agency that are involved in your care and treatment for the purpose of providing health care services to you.

1. The following are examples of the types of uses of and/or ways of sharing your information that may occur. These examples are not meant to include all possible types of use and/or disclosure.
  - a) **Treatment** – In order to provide, arrange and manage your health care, Families First will provide your information to other health care providers, Families First's staff, directly involved in your care so that they may understand your medical and/or mental health condition and needs and provide advice and/or treatment. For example, a mental health provider treating your child for a condition such as depression may need to know what medications have been prescribed for them by other health care providers in the community.
  - b) **Payment** – Your information will be used, as needed, to obtain payment for services provided to you. Families First will provide your information to billing service, to

appropriate third party payors, as required. For example, Families First may need to provide Medicaid with information about the services you received from Families First so Families First can be paid or your insurance company.

- c) **Health Care Operations** (business activities)– We may use or share, as-needed, your information in order to support the business activities and operations of Families First as required by law and funded requirements as well as continuing the quality and efficient care to you. These activities include, but are not limited to, quality assessment activities, performance evaluations of Families First’s employees, training of student interns, licensing, marketing and fund-raising activities, credentialing/licensure, surveys and conducting or arranging for other business activities.

### **AUTHORIZATION NOT REQUIRED**

1. Families First may use and/or share your information, without a written authorization from you, in the following instances:
  - a) **De-identified Information** – Your information is changed so that it does not identify you. Information is removed as well (e.g., your name, address)
  - b) **Business Associate** – To a business associate, a business associate is someone Families First contracts with to provide you with services, pay us for your treatment and our business activities (e.g., billing service or transcription service) Families First will obtain written assurance, in accordance with applicable law, the business associate will protect your information.
  - c) **Personal Representative** – To a person who, under law, has the authority to represent you in making health care decisions.
  - d) **Public Health Activities** - Such activities may be, information collected by a public health authority, as authorized by law, to prevent or control disease, injury or disability. This includes reports of child abuse or neglect.
  - e) **Federal Drug Administration (FDA)**- As required by the FDA to report adverse events, product defects or problems or biological product deviations, or to track products, or to enable product recalls, repairs or replacements, or to conduct post marketing surveillance.
  - f) **Abuse, Neglect or Domestic Violence** - To a government authority, Families First is required by law to make such disclosure. Families First will do so if it believes that sharing the information is necessary to prevent serious harm or if Families First believes that you have been the victim of abuse, neglect or domestic violence. Any such disclosure will be made in accordance with the requirements of law, which may also involve notice to you of the disclosure.
  - g) **Health Oversight Activities** - Such activities, required by law, involve government agencies involved in oversight activities that relate to the health care system, government benefit programs, government regulatory programs and civil rights law. Those activities include, for example, criminal investigations, audits, disciplinary actions, or general oversight activities relating to the community's health care system.

- h) **Court and Administrative Proceeding** - Families First may be required to share your information in response to a court order or subpoena, in case of mental health records your authorization is required to release this information.
- i) **Law Enforcement Purposes** - In certain instances, your information may have to be shared with law enforcement for law enforcement/emergency purposes. Law enforcement purposes include:
- Complying with a legal process (e.g., subpoena) or as required by law);
  - Information for identification and location purposes (e.g., suspect or missing person);
  - Information regarding a person who is or is suspected to be a crime victim;
  - In situations where the death of an individual may have resulted from criminal conduct;
  - In the event of a crime occurring on the premises of Families First;
  - A medical emergency (not on Families First 's property) has occurred, and it appears that a crime has occurred; and
  - A medical emergency occurring on Families First's premises (e.g., Mental Hygiene Arrests or accident/injury).
  - To a coroner or medical examiner for the purpose of identifying you or determining your cause of death, or to a funeral director as permitted by law and as necessary to carry out its duties.
- j) **Avert a Threat to Health or Safety** – Families First may share your information if it believes that sharing the information is necessary to prevent or lessen a serious and probable threat to the health or safety of a person or the public and the disclosure is to an individual who is reasonably able to prevent or lessen the threat.
- k) **Specialized Government Functions** - Families First may use information of individuals who are Armed Forces personnel: (1) for activities deemed necessary by appropriate military command authorities; (2) for the purpose of a determination by the Department of Veteran Affairs of eligibility for benefits; or (3) to a foreign military authority if you are a member of that foreign military service. Families First may also share your information to authorized federal officials for conducting national security and intelligence activities including the provision of protective services to the President or others legally authorized.
- l) **Inmates**. Families First may share your information to a correctional institution or a law enforcement official if you are an inmate of that correctional facility and your information is necessary to provide care and treatment to you or is necessary for the health and safety of other individual or inmates.
- m) **Required by Law**. As required by law, but such use or disclosure will be made in compliance with the law and limited to the requirements of the law.
- n) **Emergencies**: We may use or share your information in an emergency treatment situation. If treatment is required by law and the health care provider has attempted to obtain your consent but is unable to, they may still use or share your information for treatment.
- o) **Communication Barriers**: We may use and share your information if your service planner or another Families First staff tries to communicate for treatment purposes but is unable to do so due to a communication barriers and the service planner or staff determines, using professional judgement, that you intend to authorize the use or share under the circumstances (e.g., language barriers where an interpreter is needed or hearing impairment).

- p) **Sign in Sheets:** Families First may use a sign-in-sheet at the registration desk. Families First may also call your name in the waiting room when your service planner is ready to see you.
- q) **Appointment Reminders:** Families First may, from time to time, contact you to provide appointment reminders.
- r) **Treatment Alternatives/Benefits:** Families First may, from time to time, contact you about treatment alternatives, or other health benefits or services that may be of interest to you.
- s) **On-Call Coverage:** In order to provide on-call coverage for you it is necessary that Families First establish relationships with other organizations/agencies/health care providers who will take your calls after hours or if your service planner is not available. The on-call staff will provide Families First with whatever PHI that they create and will, by agreement, keep your PHI confidential.

### **AUTHORIZATION**

Uses and/or disclosures, other than those described above, will be made only with your written authorization. You may cancel the authorization, at any time, in writing, except to the extent that Families First taken an action in reliance on the use or disclosure indicated in the authorization.

### **MARKETING & FUND RAISING**

Families First may only use and/or disclose your PHI for marketing activities if we obtain from you a prior written authorization. "Marketing" activities include communications to you that encourage you to purchase or use a product or service, and the communication is not made for your care or treatment. However, marketing does not include, for example, sending you a newsletter about Families First. Marketing also includes the receipt by Families First of remuneration (monies), directly or indirectly, from a third party whose product or service is being marketed. Families First will inform you if it engages in marketing and will obtain your prior authorization.

Families First may use and/or disclose your demographic information and the dates that you received treatment from Families First, as necessary, in order to contact you for fund raising activities supported by Families First (e.g., Holy Smokes for Families First). If you do not want to receive these materials, please contact Families First President & CEO, Patricia Showell, at 404-853-2800 to request that these fund raising materials not be sent to you and/or to restrict the use of your PHI for these purposes.

### **CLERGY:**

Unless you object, members of the clergy associated with Families First may be told your religious affiliation.

### **FAMILY and/or FRIENDS:**

It is the policy of Families First, as well as required by law, that we will not confirm or deny if someone is receiving or has received services by Families First or any of its affiliates. In situations where someone is looking for you or your child, we will instruct them to contact you for that information.

Families First may sponsor events (i.e., school functions, birthday parties, picnics, school photos) in which parents and/or significant family members may take photographs or videotapes of their children at the events. It is possible they may capture you in the photograph and/or videotape.

## **YOUR RIGHTS**

### **1) You have the right to:**

- a) **Cancel any authorization, in writing, at any time. To request a (cancellation) revocation, you must submit a written request to Families First's President & CEO, Patricia Showell.**
- b) **Request restrictions on certain use and/or share of your information as provided by law. To request restrictions, you must submit a written request to Families First's President & CEO, Patricia Showell. In your written request, you must inform Families First of:**
  - **What information you want to limit;**
  - **Whether you want to limit Families First's use or disclosure, or both; and**
  - **To whom you want the limits to apply.**

**Families First is not required to agree to a restriction that you may request. If we believe it is in your best interest to permit use and disclosure of your PHI, your PHI will not be restricted. If we do agree to the requested restriction, we may not use or disclose your information in violation of that restriction unless it is needed to provide emergency treatment.**

- c) **Have confidential communications or information by alternative means or at alternative locations. You can request that we contact you at alternate locations, contact you by e-mail or fax, etc... You must make your request in writing to Families First's President & CEO, Patricia Showell. Families First will accommodate all reasonable requests.**

**\* If you would like alternative ways of communication (e-mail, fax, alternate phone numbers, etc...), please contact your service provider or the CEO.**
- d) **Review and copy your information PHI as provided by law. To review and copy your information, you must submit a written request to Families First's President & CEO, Patricia Showell. Families First can charge you a fee for the cost of copying, mailing or other supplies associated with your request. In certain situations that are defined by law, Families First may deny your request, but you will have the right to have the denial reviewed as set forth more fully in the written denial notice.**
- e) **Correct your PHI as provided by law. To request a correction, you must submit a written request to Families First's President & CEO, Patricia Showell. You must provide a reason that supports your request. Families First may deny your request if:**
  - **It is not in writing;**
  - **If you do not provide a reason in support of your request;**
  - **If the information to be amended was not created by Families First (unless the individual or entity that created the information is no longer available);**
  - **If the information is not part of your PHI maintained by Families First;**
  - **If the information is not part of the information you would be permitted to inspect and copy; and/or**
  - **If the information is accurate and complete.**

**If you disagree with Families First's denial, you will have the right to submit a written statement of disagreement with us and we may prepare a response to your statement and will provide you with a copy of this.**

- f) Receive an accounting of who your information has been shared with, what was shared and when. This right applies to those purposes other than treatment, payment or business activities as described in this Notice of Privacy Practices. It does not include those times information was shared with you for notification purposes. You have the right to receive specific information regarding these disclosures that occurred after April 14, 2003. To request an accounting, you must submit a written request to Families First's President & CEO, Patricia Showell.

The request must state:

- A time period which may not be longer than six (6) years and may not include dates before April 14, 2003;
- The request should indicate in what form you want the list (such as a paper or electronic copy);

There will be no charge for the first list you request within a twelve (12) month period, but Families First may charge you for the cost of providing additional lists. Families First will notify you of the costs involved and you can decide to withdraw or modify your request before any costs are incurred.

- g) Receive a paper copy of this Privacy Notice from Families First upon request to Families First's President & CEO, Patricia Showell.
- h) Complain to Families First or to the Secretary of Health and Human Services if you believe your privacy rights have been violated. To file a complaint with Families First, you must contact Families First's President & CEO, Patricia Showell. Complaints may be in writing or a phone call.
- i) To obtain more information on, or have your questions about your rights answered, you may contact Families First's President & CEO, Patricia Showell, or designate at (404) 853-2800 or via e-mail at [www.familiesfirst.org](http://www.familiesfirst.org)

### **Families First Agency' Requirements**

#### **1. Families First Agency:**

- a) Is required by law to maintain the privacy of your PHI and to provide you with this Privacy Notice of Families First's legal duties and privacy practices with respect to your PHI.
- b) Is required to abide by the terms of this Privacy Notice.
- c) Reserves the right to change the terms of this Privacy Notice and to make the new Privacy Notice provisions effective for all of your PHI that we maintain.
- d) Will not retaliate against you for making a complaint.
- e) Must make a good faith effort to obtain from you an acknowledgement of receipt of this Notice.

Families First  
1105 West Peachtree Street, NE  
Atlanta, GA 30357-0948

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Families First Agency includes all of its programs and sites where services are provided to individuals, children and families

### Privacy Notice

**EFFECTIVE DATE**

This Notice is in effect as of April 14, 2003.

**ACKNOWLEDGEMENT of RECEIPT:**

I acknowledge that I have received a copy of the Families First (as noted above) Privacy Notice

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Name of Individual (Printed)

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Signature of Individual

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Signature of Personal Representative

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Relationship (e.g., Attorney-In-Fact,  
Guardian, Parent if a minor)

Date Signed \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Witness: -----