

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

**General Information**

Information regarding your health care, your participation in CDAC's programs and payment for health care, are protected by two federal laws: the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), 42 U.S.C. § 1320d *et seq.*, 45 C.F.R. Parts 160 & 164, and the Confidentiality Law, 42 U.S.C. § 290dd-2, 42 C.F.R. Part 2.

**Under these laws, CDAC Behavioral Healthcare, Inc. may not say to a person outside CDAC that you attend the program; nor may CDAC disclose any information identifying you as a program participant, or disclose any other protected information except as permitted by federal law.**

CDAC must obtain your written consent before it can disclose information about you for payment purposes. For example, CDAC must obtain your written consent before it can disclose information to your health insurer in order to be paid for services. Generally, you must also sign a written consent before CDAC can share information for treatment purposes or for health care operations. However, federal law permits CDAC to disclose information *without* your written permission:

1. For research, audit or evaluations;
2. To report a crime committed on CDAC's premises or against CDAC personnel;
3. To medical personnel in a medical emergency;
4. To appropriate authorities to report suspected child abuse or neglect;
5. As allowed by a court order;
6. Pursuant to an agreement with a business associate.

For example, CDAC can disclose information without your consent to obtain legal or financial services, or to another medical facility to provide health care to you, as long as there is a business associate agreement in place.

Before CDAC can use or disclose any information about your health in a manner which is not described above, it must first obtain your specific written consent allowing it to make the disclosure. Any such written consent may be revoked by you in writing.

**Your Rights**

Under HIPAA you have the right to request restrictions on certain uses and disclosures of your health information. CDAC is not required to agree to any restrictions you request, but if it does agree then it is bound by that agreement and may not use or disclose any information which you have restricted except as necessary in a medical emergency. You have the right to request that we communicate with you by alternative means or at an alternative location. CDAC will accommodate such requests that are reasonable and will not request an explanation from you. Under HIPAA you also have the right to inspect and copy your own health information maintained by CDAC, except to the extent that the information contains psychotherapy notes or information compiled for use in a civil, criminal or administrative proceeding or in other limited circumstances. Under HIPAA you also have the right, with some exceptions, to amend health care information maintained in CDAC's records, and to request and receive an accounting of disclosures of your health related information made by CDAC during the six years prior to your request. You also have the right to receive a paper copy of this notice.

CDAC Behavioral Healthcare, Inc  
Women & Family Intervention Services  
Participant Notice

**CDAC Duties**

CDAC is required by law to maintain the privacy of your health information and to provide you with notice of its legal duties and privacy practices with respect to your health information. CDAC is required by law to abide by the terms of this notice. CDAC reserves the right to change the terms of this notice and to make new notice provisions effective for all protected health information it maintains. You will be notified in writing at the most recent address we have or your next visit to our program, whichever is quicker.

**Complaints and Reporting Violations**

You may complain to CDAC and the Secretary of the United States Department of Health and Human Services if you believe that your privacy rights have been violated under HIPAA. You may contact CDAC's privacy official using the Client Grievance form. You will not be retaliated against for filing such a complaint.

Violation of the Confidentiality Law by a program is a crime. Suspected violations of the Confidentiality Law may be reported to the United States Attorney in the district where the violation occurs.

**Contact**

For further information, contact CDAC's Privacy Official or the Program Manager at 850-434-2724.

**Effective Date:**      October 9, 2017

**Acknowledgment**

I hereby acknowledge receiving a copy of this notice.

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Date