



## Notice of Privacy Practices

This notice describes how protected health information about you may be used and disclosed and how you can get access to this information. Please review it carefully. If you have any questions about this notice, please ask your counselor or contact the Privacy Official for Employee Resource Center, Inc. at (920) 403-7600

### OUR PLEDGE REGARDING YOUR PROTECTED HEALTH INFORMATION:

We understand that information about you and your health is personal. We are committed to protecting this information about you. We create a record of care and services you receive here at Employee Resource Center (ERC). We need this record to provide you with quality care and to comply with certain legal requirements.

This notice applies to all of the records of your care generated by ERC. This notice will tell you about the ways in which we may use and disclose protected health information about you. In this notice we also describe your rights and certain obligations we have regarding the use and disclosure of your protected health information.

The Law requires us to:

- Make sure that information that identifies you is kept confidential;
- Give you this notice of our legal duties and privacy practices; and
- Follow the terms of the notice that is currently in effect.

### HOW WE MAY USE AND DISCLOSE PROTECTED HEALTH INFORMATION ABOUT YOU.

The following categories describe different ways that we use and disclose your protected health information. For each category of uses or disclosures we will explain what we mean and try to give examples. Not every use or disclosure in a category will be listed. However, all of the ways we are permitted to use and disclose information will fall within one of the categories.

- **For Treatment:** We may use protected health information about you to provide you with treatment or services. We may disclose this information about you to ERC personnel who are involved in your care.
- **For Payment:** We may use and disclose protected health information about you so that treatment and services you are going to receive outside ERC-EAP will be billed and reimbursed appropriately. For example, we may need to give your health plan information about a treatment you are going to receive to obtain prior approval or to determine whether your plan will cover the treatment.
- **For Health Care Operations:** We may disclose protected health information about you for operations within ERC. These uses and disclosures are necessary to operate ERC and make sure that all of our clients receive quality care. For example, we may use protected health information to review our treatment and services and to evaluate the performance of our staff in caring for you.
- **Individuals Involved in Your Care or Payment for Your Care:** In rare cases, we may release protected health information about you such as dates and types of certified services to a family member who helps pay for your care through their insurance plan.
- **As Required by Law:** We will disclose protected health information about you when required to do so by federal, state, or local law. For example, state certified health care facilities are required by law to allow state professionals access to client records for purposes of clinic certification or in order to comply with a court order.
- **To Avert a Serious Threat to Health or Safety:** We may use and disclose protected health information about you when necessary to prevent a serious threat to your health and safety or the health and safety of the public or another person. Any disclosure, however, would only be to someone able to help prevent the threat.

### SPECIAL SITUATIONS

- **Workers' Compensation:** In some cases, we may be required to release protected health information about you if you have applied for workers' compensation or similar programs. These programs provide benefits for work-related injuries or illness.
- **Public Health Risks:** We may disclose protected health information about you for public health activities. These activities generally include the following:
  - To report child abuse or neglect
  - To notify the appropriate government authority if we believe a client has been the victim of abuse, neglect or domestic violence. We will only make this disclosure if you agree or when required or authorized by law.
- **Health Oversight Activities:** We may disclose protected health information about you to a health oversight agency for activities authorized by law. These oversight activities include, for example, audits, investigations, inspections, and licensure. These activities are necessary for the government to monitor the health care system, government programs, and compliance with civil rights laws.
- **Lawsuits and Disputes:** If you are involved in a lawsuit or a dispute, we may disclose protected health information about you in response to a court or administrative order. In all other situations we will attempt to hold your protected health information in confidence unless you waive that protection by signing an information disclosure form.

Whenever possible and reasonable, we will make efforts to tell you about requests for your protected health information. We will make every effort to comply with your wishes and directives regarding the release of your records, except when mandated by law.

## YOUR RIGHTS REGARDING PROTECTED HEALTH INFORMATION ABOUT YOU

You have the following rights regarding protected health information we maintain about you at Employee Resource Center, Inc.

1. **Right to Inspect and Copy:** You have the right to inspect and obtain copies of information that may be used to make decisions about your care. Usually this includes medical records, certifications of care, but does not include psychotherapy notes.

To inspect and copy health information that may be used to make decisions about you, you must submit your request in writing to Employee Resource Center, Inc Privacy Official. We may deny your request to inspect and copy health information in certain very limited circumstances. If you are denied access to information, you may request that the denial be reviewed. Another licensed professional chosen by ERC will review your request and the denial. We will comply with the outcome of the review.

2. **Right to Amend:** If you feel that information we have about you is incorrect or incomplete, you may ask us to amend the information. You have the right to request an amendment for as long as the information is kept by or for ERC.

To request an amendment, your request must be made in writing and submitted to Employee Resource Center, Inc. Privacy Official. In addition, you must provide a reason that supports your request. We cannot amend information that:

- Was not created by us, unless the person or entity that created the information is no longer available to make the amendment;
  - Is not part of the health information kept by ERC;
  - Is not part of the information which you would be permitted to inspect or copy; or
  - Is accurate and complete.
3. **Right to an Accounting of Disclosures:** You have the right to request an "accounting of disclosures". This is a list of the disclosures we made of protected health information about you. To request this list or accounting of disclosures, you must submit your request in writing to Employee Resource Center, Inc. Privacy Official. Your request must state a time period for which you are requesting the information. Your request should indicate in what form you want the list (for example, on paper, electronically).
  4. **Right to Request Restrictions:** You have the right to request a restriction or limitation on the protected health information we use or disclose about you for treatment, payment or health care operations. You also have the right to request a limit on the protected health information we disclose about you to someone who is involved in your care or the payment for your care.

We are not required to agree to your request. If we do agree, we will comply with your request unless the information is needed to provide you emergency/crisis intervention services.

To request restrictions, you must make your request in writing to Employee Resource Center, Inc. Privacy Official.

5. **Notification of Breach:** You have a right to, and will receive notification from ERC regarding any breaches of your protected health information as required by law.
6. **Right to a Paper Copy of This Notice:** You have the right to a paper copy of this notice. You may ask us to give you a copy of this notice at any time.

## CHANGES TO THIS NOTICE

We reserve the right to change this notice. We reserve the right to make the revised or changed notice effective for information we already have about you as well as any information we receive in the future. We will post a copy of the current notice in our office waiting rooms. The notice will contain on the first page, in the top right-hand corner, the effective date.

## COMPLAINTS

If you believe your privacy rights have been violated, you may file a complaint with Employee Resource Center or with the Secretary of the Department of Health and Human Services. To file a complaint with Employee Resource Center, contact the Privacy Officer at, Employee Resource Center, Inc. 1511 W. Main Ave. DePere, WI 54115. All complaints must be submitted in writing.

## **YOU WILL NOT BE PENALIZED FOR FILING A COMPLAINT**

## OTHER USES OF PROTECTED HEALTH INFORMATION

Other uses and disclosures of protected health information not covered by this notice or the laws that apply to us will be made only with your written permission. If you provide us permission to use or disclose protected health information about you, you may revoke that permission, in writing at any time. If you revoke your permission, we will no longer use or disclose protected health information about you for the reasons covered by your written authorization. You understand that we are unable to take back any disclosures we have already made with your permission, and that we are required to retain our records of the care that we provide you.

Green Bay  
1511 West Main Avenue  
DePere, WI 54115  
1-920-403-7600

Mailing Address  
PO Box 13156  
Green Bay, WI  
54307 - 3156

Appleton  
2565 E Calumet Street Ste. 6  
Appleton, WI 54915  
1-920-993-2000

Marshfield & Stevens Point  
Or  
To Reach Any ERC Office  
1-800-222-8590