

Privacy Notice

The Counseling Center at CELA Privacy Notice describes how medical information about you may be used and disclosed, and how you can get access to this information. Please review it carefully.

Medical Information about You is Personal

The Counseling Center at CELA creates a record with information provided by you as well as information from our assessments, sessions with you, and information that may be provided by other medical or healthcare professionals, (for example, your primary care physician or a specialist who is treating you.) We need this information in order to provide you with the best services to meet your needs.

The following categories describe different ways that protected health information may be used and disclosed: for treatment; for healthcare business operations; as required by law; to avert a serious threat to your health or safety or to the health or safety of another person; for public health risks, (for example, to prevent or control disease, injury, or disability, to report reactions to medications, to notify a person who may have been exposed to a disease or may be at risk for contracting or spreading a disease or condition); for health oversight activities, lawsuits and disputes, in response to a court order or subpoena, discovery requests, or other lawful process; law enforcement in response to a court order, subpoena, warrant, summons, or similar process, subject to all applicable legal requirements; coroners, medical examiners, funeral directors; information not personally identifiable.

Certain categories of protected health information have extra protections by law, and therefore require special written authorization for disclosure. For example, most uses and disclosures of psychotherapy notes require special written authorization.

Protected Health Information and Your Rights

Right to Inspect and Copy:

You have the right, with a few exceptions, to inspect and copy protected health information that may be used to make decisions about your care. Typically this does not include psychotherapy notes or information gathered for judicial proceedings.

To inspect and copy your protected health information, submit a request in writing to CELA at 675 VFW Parkway #271, Chestnut Hill, MA 02467 USA. We may charge a reasonable fee for the cost of copying, mailing, or other supplies associated with your request.

Right to Amend:

If you feel that protected health information we may have about you is incorrect or incomplete, you may ask The Counseling Center at CELA to amend the information. You have the right to request an amendment for as long as the information is kept by The Counseling Center at CELA. Requests for amendment must be done in writing. Mail all written requests to : CELA, 675 VFW Parkway #271, Chestnut Hill, MA 02467 USA. It is The Counseling Center at CELA's policy to keep client records for ten years.

Requests for amendment may be denied if they are not in writing or if they do not include a reason to support the request(s). Amendment requests may be denied if:

- The information was not created by The Counseling Center at CELA;
- The information is not part of the information kept by The Counseling Center at CELA;
- The information is not part of the information which you would be permitted to inspect and copy; or
- The information is accurate and complete.

The Counseling Center at CELA will respond to your written request in writing within sixty (60) days from receipt of written request.

Right for an Accounting of Disclosures:

You have the right to ask for a list of the disclosures of your protected health information that The Counseling Center at CELA has made during the previous six years, but the request cannot include dates before April 14, 2013. This listing will include the dates of each disclosure, who received the disclosed protected health information, a brief description of the protected health information disclosed, and the reason for the disclosure. The listing will not include the following disclosures:

- Disclosures made for the purpose of treatment, payment, healthcare services, operations, or disclosures made to family or responsible caregivers;
- Disclosures made directly to you;
- Disclosures made based on a valid authorization from you or from your legally authorized representative;
- Oral or incidental disclosures;
- Disclosures made for the purpose of national security, or to correctional institutions or law enforcement officers;
- Disclosures made prior to April 14, 2013.

You must request this listing of disclosures by submitting your request in writing to The Counseling Center at CELA. Mail all written requests to: CELA, 675 VFW Parkway #271, Chestnut Hill, MA 02467 USA.

The Counseling Center at CELA will provide you with the list within sixty (60) days of receipt of your written request, unless you agree to a thirty (30) day extension. There is no charge to you for the list, unless you request such a list more than once a year.

Right to Request Restrictions:

You have the right to request restrictions on how your protected health information is used or to whom your information is disclosed, even if the restriction affects the services you receive. However, The Counseling Center at CELA is not required to agree to your requested restriction and, even if we agree to the restriction, we are permitted to use your protected health information without complying with the restriction if necessary in an emergency situation.

Restrictions must be requested in writing. In your written request you must tell us: (1) what information you want to limit; (2) whether you want to limit our use, disclosure, or both; (3) to whom you want the limits to apply. Although The Counseling Center at CELA is generally not required to agree to requested restrictions, The Counseling Center at CELA is required to keep your protected health information confidential if you pay for a healthcare service “out-of-pocket” in full, and you request that we not disclose protected health information related to that healthcare service(s).

Mail written requests for restrictions to: CELA, 675 VFW Parkway #271, Chestnut Hill, MA 02467 USA.

Right to Request Confidential Communications:

You have the right to request that The Counseling Center at CELA communicates with you about protected health information matters in a certain way or at a certain location. For example, you can ask that we only contact you at work, or by mail, or to not leave voicemail messages.

To request confidential communications, you must submit your request to The Counseling Center at CELA in writing and mail it to: CELA, 675 VFW Parkway #271, Chestnut Hill, MA 02467 USA. We will not ask you the reason for your request. We will accommodate all reasonable requests. Your request must specify 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 The Counseling Center at CELA to provide you with a paper copy of this notice at any time. Even if you have agreed to receive this Notice electronically, you are still entitled to a paper copy of this Notice. You may obtain a paper copy of this Notice by contacting The Counseling Center at CELA by mail at CELA, 675 VFW Parkway #271, Chestnut Hill, MA 02467 USA, by telephone at 617-431-3849, or by email using the message box below.

Changes to this Notice:

The effective date of this Notice is September 30, 2014. It will remain in effect until it is replaced by The Counseling Center at CELA.

Complaints:

If you believe your privacy rights have been violated, you may file a complaint with The Counseling Center at CELA or with the Secretary of the Department of Health and Human Services.

To file a complaint with The Counseling Center at CELA, submit your complaint in writing to The Counseling Center at CELA and mail it to: CELA, 675 VFW Parkway #271, Chestnut Hill, MA 02467 USA. 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 by The Counseling Center at CELA's Policy Statement will be made only with your written permission.

Revoking Permissions:

If you provide The Counseling Center at CELA 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, The Counseling Center at CELA will no longer use or disclose protected health information about you for the reasons covered by your written authorization. You understand that The Counseling Center at CELA is unable to take back any disclosures we have already made with your permission, and that we are required to retain our records of services we have provided to you.

If you have any questions about this notice, please contact The Counseling Center at CELA: 675 VFW Parkway #271, Chestnut Hill, MA 02467 USA | 617-431-3849 | counselingatcela.com | counselingatcela@gmail.com.