

Notice of Privacy Practices

This notice describes how information about you may be used and disclosed and how you can get access to this information pursuant to the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”). Please review this notice carefully. You will be asked to sign an acknowledgement form regarding this notice and your rights.

Introduction

McLaughlin Young Employee Services, Inc. (“MYES”) is committed to utilizing protected health information (“PHI”) about you in a responsible manner. This Notice of Privacy Practices (“NPP”) describes the information MYES collects, and how and when MYES may use or disclose that information. This NPP also describes your rights regarding this PHI. This NPP is effective April 14, 2003 and applies to all PHI as that term is defined by federal law.

Services MYES Provides and Information MYES Collects

MYES is an Employee Assistance Program Provider (“EAP”). MYES provides or arranges for Affiliates to provide counseling or other services to employees of companies that MYES contracts with to provide EAP services. An employee (“Client”) of a company may be referred by a company supervisor to MYES, or the employee may come to MYES on his/her own. In providing counseling or other services to the Client, MYES will create a summary record of each visit or contact with the Client. These records may contain PHI.

How MYES May Use and Disclose Your Health Information

HIPAA permits MYES to use your PHI for purposes of treatment, payment, and health care operations. “Treatment” generally means the provision, coordination or management of health care and related services among health care providers, consultation between health care providers regarding a Client, or referral of a Client from one health care provider to another. For instance, MYES may disclose your PHI to a counselor, physician or other health care provider to whom you may be referred to by MYES. MYES and other providers may use your PHI in order to coordinate and manage your care and arrange for referrals to professionals involved in your treatment.

Payment involves the various activities of health care providers to obtain payment or other reimbursement for the services you receive. If certain services may be billed to a Client’s health insurance plan, PHI may be disclosed to that plan, or third-party administrator for the plan, in order to secure payment for services. “Health Care Operations” include administrative, financial, legal and quality improvement activities that MYES engages in from time to time in its business. Among other things MYES may engage in quality assessment and improvement activities, case management activities, the evaluation of MYES Affiliates, and the training of MYES personnel. MYES may release PHI to individuals or organizations involved in any of these Health Care Operations.

MYES does not provide long term psychotherapy services. However, if another health care provider delivers psychotherapy services and MYES secures that medical information for purposes of ongoing treatment, those psychotherapy notes will only be subject to additional HIPAA restrictions on disclosure.

Other Disclosure of Your Health Care Information Permitted Under HIPAA

1. MYES is permitted to disclose your PHI to federal and state agencies that regulate or investigate the health care industry.

2. MYES is also permitted to disclose this information to persons or organizations who perform certain services for MYES as “Business Associates.” Business Associates may include, but are not limited to, accreditation organizations, accountants, attorneys and consultants. MYES Business Associates are contractually obligated to maintain the privacy of your PHI to the same extent as MYES is required to do so.
3. MYES may disclose your PHI to law enforcement officials, subject to applicable state and federal laws and regulations, for purposes of complying with a court order, subpoena, or other legal process. When reasonable and appropriate, MYES may attempt to notify you in advance before disclosing PHI in response to a subpoena or other legal process.
4. If you are involved in a lawsuit or other legal dispute or proceeding, MYES may disclose your PHI in response to a court order or other discovery request with which MYES is required by law to comply. MYES may disclose PHI if an arbitrator or arbitration panel compels disclosure.
5. There are certain situations where disclosure may be compelled or permitted by law. PHI may be provided to law enforcement personnel or person able to prevent, mitigate or lessen a serious threat to the health or safety of you, or another person or the public. Disclosure may be compelled or permitted by law if you report the commission of or contemplation of a commission of a crime.
6. When permitted by law, we may use or disclose PHI about you without your permission for various activities that are recognized as “national priorities”. These may be for specific government functions which impact national security, or veteran or military personnel.
7. MYES may disclose your PHI to researchers in the event MYES is involved in any research activity where results may improve practices, and the information may be used in quantifying or qualifying data which has no individual identifying indicators beyond MYES and researchers involved.
8. We may also disclose your PHI, to the extent required by law, to organizations or agencies involved in adjudicating worker’s compensation claims in the event you should file such a claim, and to public health organizations responsible for preventing or controlling disease, injury, or disability.
9. MYES may be obligated to disclose your PHI if required to do so by laws protecting children or vulnerable adults from abuse.

Your Health Information Rights

You have the following rights regarding the PHI that MYES creates and maintains regarding your treatment.

1. You have the right to obtain a copy of this Notification of Privacy Practices.
2. You have the right to inspect and copy your health information, except for information needed for civil, criminal, or administrative actions and proceedings, and psychotherapy notes. Under certain circumstances your request may be denied. If your request is denied it will be done in writing and will state the reason/s for the denial along with your right to a denial review. You may be charged a fee for those copies in accordance with state law. Copies of your PHI will not exceed a reasonable marketplace cost per page. With your approval you may be provided a summary or explanation of the PHI, as well as to the cost, in advance.
3. You have the right to request amendment to your health record if any information contained in that record is wrong or incomplete. You must send MYES a written request to amend that information (see MYES Privacy Officer address below). However, MYES is not required to agree to your request. Your request may be denied if it is found that: the PHI (a) correct and complete, (b) forbidden to be disclosed, (c) not part of EAP records, or (d) original source is other than EAP. If you are denied your request, it will be in writing and will state the reason/s for the denial.
4. You have a right to obtain an accounting of disclosures made by MYES of your PHI that have occurred after Oct.15th, 2003. However, this does not include disclosures made directly to you, or disclosures to others for purposes of treatment, payment, or health care operations as previously described in this NPP. You must make a request in writing to receive the accounting of disclosures. The accounting of disclosure may contain to whom the PHI was disclosed, a brief description of the information, the reason for disclosure and the date of disclosure.
5. You have the right to ask that MYES communicate with you about your health care matters confidentially. For example, you may ask that we only contact you at home or by e-mail.



6. You have the right to authorize MYES in writing to use or disclose your PHI for any other purpose. For instance you may authorize us to release your PHI to a disability insurance company if you have applied to that company for disability benefits. You must sign a written authorization which MYES will provide you upon request, and you may revoke this authorization at any time in accordance with the terms of that document.
7. You may request that restrictions be placed upon certain uses and disclosures of your information as provided under HIPAA. If for some reason MYES is unable to agree to any restriction you request, we will inform you of that.

How to Secure Additional Information or Report a Problem

If you have questions or need additional information, or you have a problem with the handling of your PHI, you may contact the MYES Privacy Officer at 704-529-1428. If you believe your privacy rights under HIPAA have been violated, you may file a written complaint with the MYES Privacy Officer at 5925 Carnegie Blvd, Suite 350, Charlotte, NC 28209, or you may file a complaint with the Office for Civil Rights, U.S. Department of Health and Human Services, at 200 Independence Avenue, S.W., Room 509F, HHH Building, Washington, D.C. 20201. There will be no retaliation if you file a complaint with either the MYES Privacy Officer or the Office for Civil Rights. You must file a complaint within 180 days of the date on which the action occurred that caused the problem. You may find a copy of this NPP posted on the MYES website at www.myemployeeservices.com.



Explanation of EAP Services

McLaughlin Young Employee Services (MYES) is an employee benefit for you, your spouse and dependent family members, which provides assessment, short-term counseling, referrals to community resources and 24 hour emergency help.

If you choose to continue with your counselor beyond the authorized EAP sessions, the counselor will ask you to sign a "Self-Referral Form" clarifying this decision.

If you discontinue your use of EAP services and/or MYES has had no communication with you for 90 days, your file may be automatically closed. However, you may call 800-633-3353, and a new file can be opened for you if deemed appropriate.

Kindly give 24 hours' notice in case of a cancellation. Otherwise the time will be counted as one of your allowed visits.

Counseling sessions are confidential, but limits to confidentiality are prescribed by law. If you communicate in a counseling session that you are going to harm yourself or someone else, action must be taken in accordance with the law and ethical standards of the profession. If there is a suspicion or admission of an incidence of child abuse or elder abuse, MYES must report the case to the Department of Social Services. MYES will also take immediate action to help you through the process. Otherwise, it will not communicate to anyone regarding services rendered to you and your family without your verbal or written consent.

Acknowledgment of Receipt of Notice of Privacy Practices

The undersigned Client of McLaughlin Young Employee Services, Inc. (MYES) acknowledges receipt of the Notice of Privacy Practices (NPP). This NPP is provided to the Client on behalf of the counselors employed by MYES as well as MYES Affiliates. The Client has read the NPP and understands that MYES may utilize Client's Protected Health Information (PHI) in the ways described in the NPP. The Client has retained a copy of the NPP and understands that further information may be obtained from the MYES Privacy Officer.

I have read the above and understand the policies and conditions of the Employee Assistance Program.

Date _____ Client Name _____ Client Signature _____
Please Print

I give MYES permission to contact me in regards to my services. Yes No

- Client refused to sign but was given the NPP.
- Client's immediate emotional/psychological needs prevented obtaining acknowledgement of NPP.
- Signed acknowledgement will be requested at the next opportunity to do so.
- Client unavailable to sign but agreed that copy of NPP could be mailed (Please list full address below).
- Other (Please specify) or if mailed, list full address: _____