



"Notice of Privacy Practices"

+ Consent to Accept This Office's Confidentiality Policies
THIS NOTICE INVOLVES YOUR PRIVACY RIGHTS
AND DESCRIBES HOW INFORMATION ABOUT YOU MAY BE DISCLOSED,
AND HOW YOU CAN OBTAIN ACCESS TO THIS INFORMATION.
PLEASE REVIEW IT CAREFULLY.

I. Confidentiality:

Uses and Disclosures of Information Requiring Your Authorization or Consent

As a rule, Newport Integrated Behavioral Healthcare, Inc. will disclose no information about you, or the fact that you are a patient, without your written consent. Newport Integrated Behavioral Healthcare, Inc. formal Mental Health Record describes the services provided to you and contains the dates of sessions, diagnosis, functional status, symptoms, prognosis, progress, and any psychological testing reports. Healthcare providers are legally allowed to use or disclose records or information for treatment, payment, and health care operations purposes. **However, Newport Integrated Behavioral Healthcare, Inc. do not routinely disclose information in such circumstances, thus we will require your permission in advance, either through your consent at the onset of treatment (by signing the general consent form), or through your written authorization at the time the need for disclosure arises.** You may revoke your permission, in writing, at any time, by contacting Newport Integrated Behavioral Healthcare, Inc.

II. "Limits of Confidentiality:"

Possible Uses and Disclosures of Mental Health Records without Consent or Authorization

There are some important exceptions to this rule of confidentiality - some of policies at Newport Integrated Behavioral Healthcare, Inc. and some required by law. If you wish to receive behavioral health services from Newport Integrated Behavioral Healthcare, Inc. you must sign the attached form indicating that you understand and consent to accept the policies about confidentiality and its limits. The privacy and confidentiality policy will be discussed at onset of treatment, but you may reopen the conversation at any time during your treatment.

Newport Integrated Behavioral Healthcare, Inc. may use or disclose records or other information about you without your consent or authorization in the following circumstances, either by policy, or because legally required:

- **Emergency** If you are involved in a life-threatening emergency and Newport Integrated Behavioral Healthcare, Inc. cannot ask your permission, Newport Integrated Behavioral Healthcare providers will share information if they believe you would have wanted them to do so, or if they believe it will be helpful to you.
- **Child Abuse Reporting:** If Newport Integrated Behavioral Healthcare, Inc. have reason to suspect that a child is abused or neglected, Newport Integrated



Behavioral Healthcare, Inc providers are required by Georgia law to report the matter immediately to the Georgia Department of Social Services.

- **Adult Abuse Reporting:** If Newport Integrated Behavioral Healthcare, Inc. have reason to suspect that an elderly or incapacitated adult is abused, neglected or exploited, Newport Integrated Behavioral Healthcare, Inc providers required by Georgia law to immediately make a report and provide relevant information to the Georgia Department of Welfare or Social Services.
- **Health Oversight:** Georgia law requires that they report misconduct by a mental health care provider of their own profession. By policy, Newport Integrated Behavioral Healthcare, Inc. reserves the right to report misconduct by health care providers of other professions. [For Counselors: Georgia law requires that licensed counselors report misconduct by any mental health care provider.]. By law, if Newport Integrated Behavioral Healthcare, Inc. describe unprofessional conduct by another mental health provider of any profession, Newport Integrated Behavioral Healthcare, Inc. is required to explain to you how to make a report to the licensing board. If you are yourself a health care provider, Newport Integrated Behavioral Healthcare, Inc is required by law to report to your licensing board if Newport Integrated Behavioral Healthcare, Inc providers believe your condition places the public at risk. Georgia Licensing Boards have the power, when necessary, to subpoena relevant records for investigating a complaint of provider incompetence or misconduct.
 - **Health Oversight Activities:** We may disclose medical information 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.
- **Court Proceedings:** If you are involved in a court proceeding and a request is made for information about your diagnosis and treatment and the records thereof, such information is privileged under state law, and Newport Integrated Behavioral Healthcare, Inc. will not release information unless you provide written authorization or a judge issues a court order. If Newport Integrated Behavioral Healthcare, Inc. receive a subpoena for records or testimony, Newport Integrated Behavioral Healthcare, Inc. will notify you so that you (or your attorney) can file a motion to quash (block) the subpoena and can give reasons why Newport Integrated Behavioral Healthcare, Inc providers think your records should be protected from disclosure. However, while awaiting the judge's decision, Newport Integrated Behavioral Healthcare, Inc. is required to place said records in a sealed envelope and provide them to the Clerk of Court. NOTE: In Georgia civil court cases, therapy information or records are not protected by patient-therapist privilege in child abuse cases, in cases in which your mental health is an issue (e.g., if you sue someone for mental/emotional damages), or in any case in which the judge deems the information to be "necessary for the proper administration of justice." In criminal cases, Georgia has no statute granting therapist-patient privilege, although records can sometimes be protected on another basis. Protections of privilege may not apply if Newport Integrated Behavioral Healthcare, Inc providers do an evaluation for a third party or where the evaluation is court- ordered. You will be informed in advance if this is the case.



- **Serious Threat to Health or Safety:** Under Georgia law, if you communicate to Newport Integrated Behavioral Healthcare, Inc providers a specific and immediate threat to cause serious bodily injury or death, to an identified or to an identifiable person, and Newport Integrated Behavioral Healthcare, Inc providers believe you have the intent and ability to carry out that threat immediately or imminently, Newport Integrated Behavioral Healthcare, Inc providers are legally required to take steps to protect third parties. These precautions may include 1) warning the potential victim(s), or the parent or guardian of the potential victim(s), if under 18, 2) notifying a law enforcement officer, or 3) seeking your hospitalization. By Newport Integrated Behavioral Healthcare, Inc policy, Newport Integrated Behavioral Healthcare, Inc. may also use and disclose medical information about you when necessary to prevent an immediate, serious threat to your own health and safety. If you become a party in a civil commitment hearing, Newport Integrated Behavioral Healthcare, Inc providers can be required to provide your records to the magistrate, your attorney or guardian *ad litem*, a CSB evaluator, or law enforcement officer, whether you are a minor or an adult.
- **Military and Veterans:** If you are a member of the armed forces, we may release medical information about you as required by military command authorities. We may also release medical information about foreign military personnel to the appropriate foreign military authority.
- **Workers' Compensation:** We may release medical information about you for workers' compensation or similar programs. These programs provide benefits for work-related injuries or illness. Your written authorization to this release is required, however, if you do not consent to release of information, your workers' compensation benefits may be denied and you will be responsible for the costs of your treatment.
- **Individuals Involved in Your Care or Payment for Your Care:** We may release medical information about you to a friend or family member who is involved in your medical care. We may also give information to someone who helps pay for your care. In addition, we may disclose medical information about you to an entity assisting in a disaster relief effort so that your family can be notified about your condition, status and location.
- **Research:** Under certain circumstances, we may use and disclose medical information about you for research purposes. We generally will obtain your written authorization to use your medical information for research purposes. There may be limited circumstances when access to your information for research purposes may be allowed without your specific consent. These will be limited to cases when use or disclosure was approved by an Institutional Review Board or Privacy Board.
- **Business Associates:** There are some services provided at Newport through contracts with business associates. One example is the shredding service we use when shredding your health record. When these services are contracted, we may disclose your healthcare information to our business associate so that they can perform the job we have asked them to do. To protect your health information, however, we require the business associate to appropriately safeguard your information.
- **National Security and Intelligence Activities:** We may release medical information about you to authorized federal officials for intelligence, counterintelligence, and other national security activities authorized by law.



Newport Integrated Behavioral Healthcare, Inc

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Toll Free Number: 1866-314-8287
www.nibhinc.com**

- **Appointment Reminders:** We may use and disclose medical information to contact you as a reminder that you have an appointment for treatment.
- **Inmates:** If you are an inmate of a correctional institution or under the custody of a law enforcement official, we may release medical information about you to the correctional institution or law enforcement official. This release would be necessary (1) for the facility to provide you with health care; (2) to protect your health and safety or the health and safety of others; or (3) for the safety and security of the correctional institution.
- **Compensation claim,** Newport Integrated Behavioral Healthcare, Inc is required by law, upon request, to submit your relevant mental health information to you, your employer, the insurer, or a certified rehabilitation provider.
 - **Records of Minors:** Georgia has a number of laws that limit the confidentiality of the records of minors. For example, parents, regardless of custody, may not be denied access to their child's records; and CSB evaluators in civil commitment cases have legal access to therapy records without notification or consent of parents or child. Other circumstances may also apply, and we will discuss these in detail if Newport Integrated Behavioral Healthcare, Inc providers provide services to minors.
 - Other uses and disclosures of information not covered by this notice or by the laws that apply to me will be made only with your written permission.

COMPLAINTS: If you believe your privacy rights have been violated, you may file a complaint with Newport Integrated Behavioral Healthcare, Inc. To file a complaint with the facility, contact the Privacy Officer (as listed below). All complaints must be submitted in writing. You will not be penalized for filing a complaint.

Privacy Officer: Newport Integrated Behavioral Healthcare, Inc: 1810 Moseri Road, Decatur, GA 30032. Privacy Officer Contact Phone: 404-289-8223 ext 231.