Notice of Privacy Practices

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT THE PEOPLE WE SERVE MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

The Health Insurance Portability and Accountability Act (HIPAA) Privacy rule DOES NOT CHANGE the way you get services from Living Resources, or the privacy rights you have always had under federal and state laws. The Privacy rule adds some details about how you can exercise your rights.

Our commitment to your privacy

Living Resources is required by law to protect the privacy of your protected health information, also called PHI. PHI includes information that identifies you and relates to your health, care, services, or payment for care. It may include your service plans, clinical notes, billing records, photographs, and information kept on paper or electronically.

Our employees, volunteers, trainees, and other authorized workforce members must follow this notice. Contractors and business associates who handle information for us must comply with applicable confidentiality requirements and agreements. Access is limited according to job responsibilities and applicable law.

People who may act for you

A personal representative is someone with legal authority to act for you in health care matters. We verify that authority and its scope before allowing the person to exercise your rights. A guardian or health care agent may qualify, depending on the law and the authority in effect. Being a relative or being involved in your care does not, by itself, make someone your personal representative. Other people may have specific rights under New York law. Exceptions may apply when recognizing a representative could expose you to abuse, neglect, or harm.

Questions and requests

Contact the Privacy Officer for questions about this notice, help exercising your rights, or assistance making a request.

Michael McGuire, Living Resources Privacy Officer
300 Washington Avenue Extension
Telephone: 518-218-0000, extension 4321

Email: michaelmcguire@livingresources.org

Website: www.livingresources.org

Your rights

See or obtain a copy of your records

You may ask to inspect or receive a paper or electronic copy of your health information in the records used to make decisions about you, including applicable clinical and billing records. Submit your request in writing to the Privacy Officer. We will help you with the request and will not impose unreasonable barriers to access. We will provide the requested format when readily producible, or agree with you on another readable format.

We follow applicable access deadlines. HIPAA generally requires us to act within 30 calendar days. One extension of up to 30 days is permitted only with written notice explaining the reason and the completion date. When New York Mental Hygiene Law Section 33.16 applies, eligible written requests to inspect clinical records must generally be accommodated within 10 days, and copies must be furnished within a reasonable time. We follow the applicable shorter deadline.

Any copying charge will comply with federal and state law and will be limited to permitted reasonable, cost-based charges. We do not charge for searching for or retrieving records in response to your HIPAA access request. Where New York law applies, additional fee limits, inability-to-pay protections, and no-charge requirements for records supporting government benefit applications, claims, or appeals may apply. We will explain any fee in advance.

Some information may be excluded from access under applicable law. If we deny access, we will explain the reason in writing and describe any available review or appeal rights and complaint options. Certain HIPAA denials may be reviewed by an independent licensed health care professional. Additional review rights may apply under New York law, including review by the applicable clinical record access review committee.

Ask for a correction

You may ask us in writing to amend information you believe is incorrect or incomplete. Explain what you want corrected and why. We generally act within 60 days, with one permitted extension of up to 30 days after written notice. We may deny an amendment for reasons allowed by law. If we deny it, we will explain why and how you may submit a statement of disagreement to be associated with the disputed information.

Receive a list of certain disclosures

You may request an accounting of certain disclosures made during the six years before your request, or a shorter period you specify. HIPAA excludes certain disclosures, including many disclosures for treatment, payment, health care operations, disclosures to you, and disclosures you authorized. Other laws may provide additional rights. The first HIPAA accounting in any 12-month period is free. We will explain any permitted fee for additional requests and let you change or withdraw the request.

Ask us to contact you privately

You may ask us to contact you in a particular way or at a different location, such as using a particular telephone number or mailing address. We will accommodate reasonable requests. You do not have to explain the reason for a confidential communication request.

Your choices and authorizations

Ask us to limit information sharing

You may ask us not to use or disclose certain information for treatment, payment, health care operations, or sharing with people involved in your care. We are generally not required to agree, but we will tell you, our decision. If we agree, we will follow the restrictions except as permitted by law, including certain emergency treatment situations.

If you or someone other than your health plan pays in full out of pocket for a specific item or service, you may ask us not to disclose information about that item or service to your health plan for payment or health care operations. We must honor that request unless disclosure is required by law.

Receive this notice and breach notifications

You may request a paper copy of this notice at any time, even if you agreed to receive it electronically. We will notify you following a breach of your unsecured PHI when notification is required by law.

Sharing with family and others involved in your care

When permitted by applicable law, we may share information directly relevant to a family member's, friends, or other person's involvement in your care or payment for care if you agree or have an opportunity to object and do not object. We may also share limited information to help notify these people of your location or general condition, including through authorized disaster relief organizations.

If you cannot express your wishes because you are incapacitated or an emergency prevents us from asking, we may share limited, relevant information with people involved in your care when professional judgment supports that doing so is in your best interest and the law permits it. This does not create a general exception to laws requiring written consent or authorization.

Uses that generally require written authorization

We obtain your written authorization for most uses and disclosures of Medical and Behavioral Health notes, and disclosures that constitute a sale of PHI under HIPAA, except where a specific legal exception applies. Psychotherapy notes have a specific legal meaning and are not the same as all mental health treatment records. Publicity, photographs, newsletters, and press releases that identify you require appropriate written permission when required by applicable law.

For uses and disclosures not otherwise permitted or required by law and described in this notice, we obtain your written authorization. The authorization identifies the information, who may disclose and receive it, its purpose, and when it expires, along with other required terms. You may revoke it in writing at any time. Revocation does not undo actions already taken in reliance on it or eliminate legal record retention requirements.

Fundraising

Consistent with our practices, we seek your permission before using or sharing your information for fundraising. You may decline or opt out of future fundraising communications at any time. Your decision will not affect your treatment or payment.

How we use and disclose information

The categories below describe uses and disclosures that may be permitted without your written HIPAA authorization. They do not override stricter laws. We comply with applicable New York confidentiality requirements, including Mental Hygiene Law Section 33.13, HIV-related confidentiality requirements, and federal substance use disorder record protections. We obtain additional consent or authorization when those laws require it.

Treatment and coordination of services

We may use your information to provide treatment, develop service plans, and coordinate care. For example, authorized staff may discuss your support needs or communicate with a treatment provider about medication or services. Sharing outside Living Resources occurs only when applicable legal requirements are satisfied.

Payment

We may use or disclose information to bill for services, obtain authorizations, verify coverage, and receive payment. For example, we may provide Medicaid or another insurer with information needed to process a claim, subject to applicable confidentiality rules and any restriction we must honor.

Health care operations

We may use or disclose information to operate our programs, review service quality, train authorized personnel, conduct audits, assess staff performance, obtain legal advice, and investigate compliance concerns. Business associates may receive information needed to perform services for us under required privacy and security agreements. We limit uses and disclosures to the minimum necessary when that standard applies.

Required reporting and oversight

We disclose information when federal or state law requires it, including legally required abuse or neglect reports and disclosures to HHS for privacy compliance review. We may disclose information for authorized public health activities, such as disease reporting, product safety, or medication reactions, and authorize oversight agencies for inspections, licensing, audits, or investigations. We apply the legal conditions and limits for each disclosure.

Court proceedings and law enforcement

We may disclose information for judicial or administrative proceedings or law enforcement only when the applicable legal conditions are met. A request or subpoena alone does not automatically authorize release of every record. We evaluate the legal authority, any required consent, notice, protective order, or court order, and additional New York or federal restrictions before disclosure.

Serious threats and other permitted purposes

When the law permits, we may share information to prevent or reduce a serious and imminent threat to health or safety; with coroners, medical examiners, or funeral directors; for organ, eye, or tissue donation; for workers' compensation; for legally authorized national security or protective services; or with correctional institutions or officials under applicable conditions. We may share limited information to coordinate authorized public benefit programs when the law permits. Each disclosure must meet the legal requirements that apply to the information and purpose.

Research

Research uses and disclosures require the applicable consent, authorization, or legally permitted waiver or other research pathway, together with required approvals and safeguards. Approval by an internal committee alone does not override applicable confidentiality requirements.

Special protection and our responsibilities

Information with additional legal protection

Some records have additional protections under New York or federal law, including mental health and developmental disability clinical records, HIV-related information, certain education records, and substance use disorder patient records protected by 42 CFR Part 2. We follow those requirements, including applicable consent and limits on further disclosure. The general permissions described in this notice do not eliminate those protections.

If we hold your substance use disorder patient records protected by Part 2, those records and testimony describing their contents may not be used or disclosed in civil, criminal, administrative, or legislative proceedings against you without your written consent or a qualifying Part 2 court order. Before such an order is issued, the law requires notice and an opportunity to be heard by you or the holder of the records. A qualifying court order must be accompanied by a subpoena or similar legal requirement compelling disclosure before the records may be used or disclosed.

Our responsibilities

We must maintain the privacy of your PHI, provide this notice of our legal duties and privacy practices, and follow the notice currently in effect. We must provide required notification after a breach of unsecured PHI, respond to your rights requests as required by law, and obtain written authorization when required. We will not use or disclose your information for other purposes without your authorization unless the law permits or requires it.

Changes to this notice

We may change this notice and make revised terms apply to information we already have and information we receive in the future, as permitted by law. The revised notice will state its effective date. We will make it available upon request, at our service locations as required, and at www.livingresources.org. We will also offer a revised copy at your next scheduled Life Planning meeting. You may request a copy sooner by contacting the Privacy Officer.

Questions and complaints

If you believe your privacy rights have been violated, contact the Living Resources Privacy Officer using the contact information on the first page. The officer can explain how to submit a written complaint and help you do so. You may also file a complaint directly with the U.S. Department of Health and Human Services Office for Civil Rights. You do not have to complain to Living Resources first.

HHS Office for Civil Rights
Website: https://www.hhs.gov/hipaa/filing-a-complaint/
Telephone: 1-800-368-1019
TDD: 1-800-537-7697
Mail: Centralized Case Management Operations
U.S. Department of Health and Human Services
200 Independence Avenue SW, Room 509F, HHH Building
Washington, DC 20201

You will not be penalized or retaliated against for filing a complaint or exercising your privacy rights.