



NOTICE OF PRIVACY PRACTICES

Effective: April 14, 2003

THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Each time you visit a doctor, hospital, pharmacist, counselor or any other person that provides you health care services, a record of your visit is made. Typically this record contains information about you, such as reasons why you are seeking care, assessments, and a plan for future care and billing information. Youth in Need, Inc. ("YIN") (sometimes referred to as "we," "our," or "us") may create or maintain this personal information when it provides services to you, such as when a social worker provides counseling to you. YIN understands that this information, often referred to, as your "medical information" or "health information," "Protected Health Information" or "personal information" needs to be protected.

YIN is required by law to maintain the privacy of your information, and to provide you with a notice of our legal duties and privacy practices with respect to such information. This Notice of Privacy Practices ("Notice") describes your legal rights, advises you of our privacy practices, and lets you know how YIN is permitted to use and disclose your personal information. We will provide you with a copy of the current Notice the first time you receive services from YIN on or after April 14, 2003. We will also visibly post a copy of the current Notice in our office.

YIN is required to abide by the terms of the Notice currently in effect. In most situations we may use this information as described in this Notice without your permission (known as an "authorization"), but there are some situations where we may use it only after we obtain your written authorization, if law requires that we do so.

YIN reserves the right to change our privacy practices and revise our Notice. Such changes will be effective immediately and will apply to all personal information regarding your health that we maintain. The Notice will contain the effective date on the first page. If we have already provided you with a copy of the Notice, and later our privacy practices change and we revise our Notice, you may obtain a copy of the revised Notice by asking for a copy of the current Notice to take home with you the next time you visit or receive health care services from YIN, or by contacting our Privacy Officer (see below).

HOW WE MAY USE AND DISCLOSE YOUR PERSONAL INFORMATION

The following categories describe different ways that we may use and disclose your personal information, and include some examples to explain such uses and disclosures. Not every use or disclosure in a category will be listed.

Some uses and disclosures of personal information may be subject to additional restrictions under federal and state laws and regulations, such as those that apply to substance abuse treatment, HIV/AIDS testing and treatment, and mental health treatment. Under certain circumstances these federal and state laws will provide your personal information with additional privacy protections beyond what is described in this Notice. For example, if you are receiving alcohol or drug abuse services, information that would identify you as a person seeking help for a substance abuse problem is protected under a separate set of federal regulations known as “Confidentiality of Alcohol and Drug Abuse Patient Records,” 42 CFR. Part 2. We may also be further bound by the counselor-client privilege to protect your personal information.

- For Treatment.
 - We may use and disclose your personal information to provide, coordinate and manage the services, supports, and services you receive from us and other providers. We may disclose your personal information to doctors, nurses, mental health providers, social workers, counselors, direct support staff and other persons who are involved in supporting you or providing services to you. We may share your personal information with health care providers when we consult with them about your case management. For example, our employees may discuss your personal information to develop and carry out a treatment plan, and to coordinate services, such as therapy, counseling, etc.

- For Payment.
 - We may use and disclose your personal information so we can be paid for the services we provide to you. This can include billing a third party, such as Medicare, Medicaid or your insurance company. For example, we may need to provide your insurance plan with information about the services we provide to you (such as a diagnosis code) so we will be reimbursed for those services. Your insurance plan may require some additional clinical information as a condition of payment. We also may need to provide the Medicaid program with information to ensure you are eligible for services you are receiving. If you do not wish us to release any information to your insurance plan or other third party payor, you will be responsible for the full cost of treatment, since insurance plan or other third party payor will not pay us without that information.
 - We may also provide your personal information to another health care provider or entity for their payment activities (such as a physician that provides you treatment).

- For Operations.
 - We may use and disclose your personal information as necessary for us to operate YIN and to maintain the quality of services that we provide to our clients. For example, we may use your personal information to review the services we provide and the performance of our employees that work with you. We may disclose your personal information to train our staff and students that may be working in our office as part of their training to become a social worker. It may also be necessary to obtain or share personal information with the Department of Social Services, Vocational Rehabilitation or other federal or state agencies. We also may use personal information to study ways to more efficiently manage our organization, for licensing activities or for our continuous quality improvement.
 - There are also some circumstances that we are permitted to disclose your personal information to another health care provider (such as another physician to which we refer you to) for his or her own operations.
- Business Associates.
 - We may disclose your personal information to certain individuals and companies that we contract with (our “business associates”) so that they can perform the job we have asked them to do. For example, we may contract with a billing company to assist us with billing insurance companies and third party payors so that we can be paid for the services that we provide to you. To protect your personal information, however, we require our business associates to appropriately safeguard your personal information and to meet the same confidentiality standards that we are required to meet.
- Appointment Reminders, Treatment and Service Alternatives and Health Related Benefits and Services.
 - We may use and disclose your personal information to contact you to remind you of an appointment or to contact you about treatment and service alternatives or health-related benefits and services that may be of interest to you. For example, we may mail you an appointment card or leave a message on your answering machine to remind about an appointment.
- Marketing Communications.
 - We may use and disclose your personal information to tell you about a product or service to encourage you to purchase the product or service. For example, we may send you a newsletter or other mailing about certain educational programs. We will not, however, sell or distribute your personal information to third parties who do not have a relationship with us unless we have obtained an authorization from you. For instance, we would not release information or client lists to pharmaceutical companies for those companies’ drug promotions unless we have your authorization to do so.

- Disclosures to Family and Others.
 - We may disclose your personal information to one of your family members relatives or close personal friends or to any other person identified by you, but we will only disclose information which we feel is relevant to that person's involvement in your care or the payment for your care. If you are able to make decisions about your care, we will follow your directions as to who is sufficiently involved in your care to receive information. If you are not present or cannot make these decisions, we will make a decision based on our experience as to whether it is in your best interest for a family member or friend to receive information about you and how much information they should receive. If there is a family member, other relative, or close personal friend that you do not want use to disclose your personal information to, please notify the YIN employee that assists you.
 - We may disclose your personal information to an entity assisting in disaster relief efforts (for example, the American Red Cross) so your family can be notified about your condition, status and location in an emergency.
- Required by Law.
 - We will disclose your personal information when we are required to do so by federal, state or local law. For instance, we are obligated to report suspected child abuse to the proper authorities.
- Public Health Activities.
 - We may disclose your personal information for public health activities and purposes. For example, we may report personal information to a public health authority that is authorized by law to collect or receive the information for purposes of preventing or controlling disease, neglect, reporting reactions to medications or problems with health care products, or notifying a person who may have been exposed to a disease or may be at risk for contracting or spreading a disease or condition.
- Victims of Abuse, Neglect or Domestic Violence.
 - We may disclose personal information to a government authority authorized by law to receive reports of abuse, neglect, or domestic violence, if we believe you are a victim of abuse, neglect, or domestic violence. We will make every effort to obtain your permission before releasing this information, but in some cases we may be required or authorized to act without your permission.
- Health Oversight Activities.
 - We may disclose personal information to a health oversight agency for activities authorized by law, including audits, investigations, inspections, licensure or

disciplinary actions. These and similar types of activities are necessary for appropriate oversight of the health care system, government benefit programs, and entities subject to various government regulations. For example, we must make our books, records and other information available to the government agencies in charge of overseeing Medicaid so that we can show these agencies that we are complying with Medicaid requirements.

- Judicial and Administrative Proceedings.
 - We may disclose your personal information if we are ordered to do so by a court or administrative tribunal. We may also disclose your personal information in response to a subpoena, discovery request, or other lawful process, but only if efforts have been made to tell you about the request or to obtain an order protecting the information requested.
- Disclosures for Law Enforcement Purposes.
 - We may disclose your personal information if asked to do so by a properly identified law enforcement official; however, if the information is protected by 42 CFR Part 2 (the federal law protecting the confidentiality of drug and alcohol abuse treatment records), a court order is required. There are other very limited circumstances when we may disclose personal information to a law enforcement official, such as when law requires us to or if we believe that you present a serious danger of future violence to yourself or another identifiable person. However, most other disclosures to law enforcement will only be in response to a court order.
- Uses and Disclosures About Decedents.
 - We may release information about a deceased person to a coroner or medical examiner to identify the person, determine the cause of death or perform other duties recognized by law. We may also release a deceased person's personal information to funeral directors as necessary to carry out their duties.
- Organ, Eye or Tissue Donation.
 - If you are an organ donor, we may disclose your personal information to organ procurement organizations or other entities engaged in the procurement, banking or transplantation of organs, eyes or tissue.
- Research.
 - Under certain circumstances, we may use or disclose your personal information for research. Before we disclose personal information for research, the research will have been approved through an approval process that evaluates the needs of the research project with your needs for privacy of your personal information. We may, however, disclose your personal information to a person who is

preparing to conduct research to permit them to prepare for the project, but no personal information will leave YIN during that person's review of the information. Enrollment in most of these research projects can only occur after you have been informed about the study, had an opportunity to ask questions, and indicated your willingness to participate in the study by signing a consent form. Other studies may be performed using your personal information without requiring your consent. These studies will not affect the services that we provide to you or your welfare, and your personal information will continue to be protected. For example, a research study may involve comparing the response of clients who attend group and family therapy sessions versus those who attend only family therapy.

- To Avert Serious Threat to Health or Safety.
 - We may use or disclose your personal information if we believe that there you present a serious danger of future violence to yourself or another, and the use or disclosure is necessary to alert appropriate parties to such danger. In such cases, we will only share your information with someone able to help prevent the danger. For example, we may make a disclosure to appropriate parties if a YIN social worker determines that that you are in such mental or emotional condition as to be dangerous to yourself or another identifiable person.
- For Specified Government Functions.
 - In certain circumstances, federal regulations authorize us to use or disclose your personal information to facilitate specified government functions relating to military and veterans, national security and intelligence activities, protective services for the President and others, medical suitability determinations, inmates and law enforcement custody. For example, if you are a member of the Armed Forces, we may use and disclose your personal information to appropriate military command authorities for activities they deem necessary to carry out their military mission.
- Workers Compensation.
 - We may disclose your personal information as authorized by, and to the extent necessary to comply with, laws relating to workers' compensation or similar programs that provide benefits for work-related injuries or illness.
- Inmates
 - If you are an inmate of a correctional institution or under the custody of a law enforcement official, we may release your personal information to the correctional institution or law enforcement official under specific circumstances such as (1) for the institution 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.

- Uses and Disclosure Requiring your Written Permission.
 - Other uses and disclosures of your personal information not covered by this Notice or the laws that apply to us will be made only with your specific written permission (sometimes known as an “authorization”). If you provide us permission to use or disclose your personal information, you may revoke that permission, in writing, at any time. If you revoke your permission, we will no longer use or disclose your personal information for the reasons covered by your written permission. 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 provided to you.

YOUR RIGHTS WITH RESPECT TO YOUR PERSONAL INFORMATION.

- Although your record is the physical property of YIN, the information contained in the record belongs to you. The following describes your rights with respect to your personal information that we maintain.
- Right to Request Restrictions.
 - You have the right to request that we restrict the uses or disclosures of your personal information that we may make to carry out treatment, payment, or operations. You also have the right to request that we restrict the uses or disclosures we make to a family member, other relative, a close personal friend or any other person identified by you. To request a restriction, you may do so at any time. If you request a restriction, you should do so by submitting your request in writing to our Privacy Officer at the address noted below and tell us: (a) what information you want to limit, (b) whether you want to limit use or disclosure or both, and (c) to whom you want the limits to apply (for example, disclosures to your spouse).
 - We are not required to agree to any requested restriction. However, if we do agree, we will follow that restriction unless the information is needed to provide emergency treatment. Even if we agree to a restriction, you can let us know later that you do not want us to continue to comply with your request.
- Right to Receive Confidential Communications.
 - You have the right to request that we communicate your personal information to you in a certain way or at a certain location. For example, you can ask that we only contact you by mail or at work. We will not require you to tell us why you are asking for the confidential communication. If you want to request confidential communication, you must do so in writing our Privacy Officer at the address noted below. Your request must state how or where you can be contacted.
 - We will use our best efforts to accommodate all reasonable requests. However, we may, if necessary, require information from you concerning how payment will

be handled. We also may require an alternate address or other method to contact you.

- Right to Inspect and Copy.
 - With a few very limited exceptions, you have the right to inspect and obtain a copy of your record that we maintain. To inspect or copy this information, you must submit your request in writing to our Privacy Officer at the address noted below. Your request should state specifically what information in the record you want to inspect or copy. If you request a copy of the information, we may charge a fee for the costs of copying and, if you ask that it be mailed to you, the cost of mailing. We may deny your request to inspect and copy your record in certain very limited circumstances. For example, psychotherapy notes are not part of your record, and we are not required to provide such notes to you. In some instances, if you are denied access to your record, you may request that the denial be reviewed. Another licensed health care professional chosen by us will review your request and the denial. The person conducting the review will not be the person who denied your request. We will comply with the outcome of the review.
- Right to Amend.
 - You have the right to request an amendment (correction) to your record if you feel that the information we have about you is incorrect or incomplete. You have the right to request an amendment for as long as we keep the information. To request an amendment, you must submit your request in writing to our Privacy Officer at the address noted below. In addition, you must provide a reason that supports your request. Although you are permitted to request that we amend your personal information, we may deny your request if it is not in writing or does not include a reason to support your request. In addition, we may deny your request if you ask us to 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 information we keep;
 - Is not part of the information which would be permitted to inspect and copy; or
 - Is accurate and complete.
- Right to an Accounting of Disclosures.
 - You have the right to an “accounting of disclosures.” An accounting of disclosures is a list of the disclosures of your personal information that we have made, with some exceptions. To request this list, you must submit your request in writing to our Privacy Officer at the address noted below. Your request must state a time period, which may not be longer than six years and may not include dates

before April 14, 2003. The first list you request within a twelve-month period will be free. For additional lists, we may charge you for the costs of providing the list.

- Right to Copy of this Notice.
 - You have the right to obtain a paper copy of our Notice of Privacy Practices. You may obtain a paper copy even though you agreed to receive the notice electronically. You may request a copy of our current Notice of Privacy Practices at any time by (1) asking for a copy of the Notice to take home with you the next time you visit or receive services from YIN, (2) contacting our Privacy Officer (see below).

- Complaints.
 - If you believe your privacy rights have been violated, you can file a complaint with us and with the Secretary of the U.S. Department of Health and Human Services.
 - To file a written complaint with us, please contact our Privacy Officer (see below).
 - To file a complaint with the Secretary of the U.S. Department of Health and Human Services, send your complaint to him or her in care of the U.S. Department of Health and Human Services - Office for Civil Rights, 601 East 12th Street - Room 248, Kansas City, Missouri 64106 or call (816) 426-7278.

- Questions and Information.
 - If you have any questions or want more information concerning this Notice of Privacy Practices, please contact our Privacy Officer (see below).

- Privacy Officer Contact Information.
 - You may contact our Privacy Officer, April Delehaunty, by phone at (636) 946-5600, or in writing at: Youth in Need, 1815 Boone's Lick Rd., St. Charles, Missouri 63301.