



Your Rights to Confidentiality

At Cornerstone Montgomery (Cornerstone), we take confidentiality very seriously. Cornerstone follows very strict rules from the United States and Maryland governments about when we can release your medical record - your protected health information. The Federal Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule and Maryland law set the rules for when Cornerstone are permitted to disclose your health information. HIPAA generally prohibits this program from using or disclosing your protected health information unless authorized by you, except as follows:

1. As required by law, Cornerstone may use and disclose your health information.
2. Cornerstone is required by law to disclose your protected health information in certain circumstances, for example, to report abuse and neglect, and to warn about dangerous behavior.
3. Cornerstone is authorized to disclose your protected health information without your consent when we use that information for treatment, payment or the health care operations of the program.

"Treatment" generally means the provision, coordination, or management of health care and related services among health care providers or by a health care provider with a third party, consultation between health care providers regarding a patient, or the referral of a patient from one health care provider to another.

"Payment" means the various activities of health care providers to obtain payment or be reimbursed for their services.

"Health care operations" mean administrative, financial, legal, and quality improvement activities of a program that are necessary to run its business and to support the core functions of treatment and payment.

Cornerstone will, without your authorization, use or disclose your protected health information for its own treatment, payment, and health care operations. For example:

- Cornerstone may use your protected health information to provide health care to you and may consult with other health care providers who are treating you.
- Cornerstone may disclose your protected health information as part of a claim for payment to a health plan such as Medicaid, Medicare or private insurance.
- Cornerstone may disclose your protected health information for the treatment or payment activities of any health care provider (including providers not covered by the Privacy Rule).
- Cornerstone may disclose your protected health information for quality improvement activities or for the purpose of health care fraud and abuse detection or compliance.

Psychotherapy Notes

Psychotherapy notes are maintained separately from the rest of the medical record. Psychotherapy notes are process notes of the statements made during a counseling session and your therapist's analysis of those statements. This does not include documentation of medications and medication management



sessions, the treatment rendered, tests, treatment plans, progress notes and statements of prognosis. Many patients do not have psychotherapy notes since this type of analysis is not typically provided by this program. If there are psychotherapy notes of your treatment, you may review and copy your psychotherapy notes only if consent is given to you by your therapist; unlike the rest of your medical record, you may not see your psychotherapy notes without the express permission of your therapist. Psychotherapy notes may be used by your therapist for your treatment without your authorization. The notes may also be used by the program without your authorization for certain other limited health care operations. Otherwise, the use and disclosure of your psychotherapy notes requires your written authorization.

Notification and Communication with Family

Cornerstone may disclose your health information to notify or assist in notifying a family member, your personal representative or another person responsible for or involved in your care about your location, or in the event of your death, or if necessary in an emergency to prevent a dangerous situation. If you are able and available to agree or object, Cornerstone will give you the opportunity to object prior to making this notification. If you are unable or unavailable to agree or object, our health professionals will use their best judgment in communication with your family and others. If you are present with a family member (for example, when you come to an appointment), Cornerstone may disclose general information about your condition to the family member unless you object.

Public Health

As required by law, Cornerstone may disclose your health information to public health authorities for purposes related to: preventing or controlling disease, injury or disability; reporting child abuse or neglect; reporting domestic violence; reporting to the Food and Drug Administration problems with products and reactions to medications; and reporting disease or infection exposure.

Health Oversight Activities

Cornerstone may disclose your health information to health agencies during the course of audits, investigations, inspections, licensure and other proceedings.

Judicial, Administrative Proceedings and/or Law Enforcement

Cornerstone may disclose your health information in the course of any administrative or judicial proceeding or to a law enforcement official for purposes such as identifying or locating a suspect, fugitive, material witness or missing person, when complying with a court order or subpoena with concurrence from all necessary parties.

Deceased Person Information

Cornerstone may disclose your health information to coroners, medical examiners and funeral directors.

Organ Donation

Cornerstone may disclose your health information to organizations involved in procuring, banking or transplanting organs and tissues if you are a registered organ donor.



Research

Cornerstone may disclose your health information to researchers conducting research that has been approved by an Institutional Review Board.

Public Safety

Cornerstone may disclose your health information to appropriate persons in order to prevent or lessen a serious and imminent threat to the health or safety of a particular person or the general public.

Specialized Government Functions

Cornerstone may disclose your health information for military, national security, prisoner and government benefits purposes.

Worker's Compensation

Cornerstone may disclose your health information as necessary to comply with worker's compensation laws.

Change of Ownership

In the event that Cornerstone is sold or merged with another organization, your health information/record will become the property of the new owner.

Maryland Health Information Exchange/CRISP

Cornerstone has chosen to participate in the Chesapeake Regional Information System for our Patients, Inc. (CRISP), a regional health information exchange serving Maryland and the District of Columbia. . As permitted by law, your health information will be shared with this exchange in order to provide faster access, better coordination of care and assist providers and public health officials in making more informed decisions. You may "opt-out" and prevent searching of your health information available through CRISP by calling 1-877-952-7477 or by completing and submitting an Opt-Out form to CRISP by mail, fax or through their website at www.crisphealth.org You can also complete an opt out form and submit it to Cornerstone Montgomery, Utilization Management Department at 6040 Southport Drive, Bethesda, MD 20814 and Cornerstone will submit it for you.

Security

Cornerstone collects your health information and stores it in a paper chart and in a protected electronic health record. This is your medical record. Your medical record (your protected health information) is kept in a secure location and only those employees who need access to your medical record for treatment, payment or health care operations, have access to your medical record unless you sign an authorization.

Minimum Necessary

It is our policy to reasonably limit disclosures of, and requests for, protected health information for payment and health care operations to the minimum necessary.



Need to Know

Cornerstone limits which members of our workforce may have access to protected health information for treatment, payment, and health care operations, based on those who need access to the information to do their jobs.

Cornerstone may also disclose information in order to contact you, for example to make appointments, to check with you about how you are doing, and to evaluate the services that Cornerstone provides to you. Cornerstone may also contact you and your family for our fund-raising efforts and send you and your family promotional materials, such as our newsletter.

Your Health Information Rights

1. You have the right to request restrictions on certain uses and disclosures of your health information. Cornerstone Montgomery, Inc. is not required to agree to the restriction that you requested.
2. You have the right to receive your health information through a reasonable alternative means or at an alternative location. This means that you could request information should be sent to you at an address other than your residence or through a non-traditional means such as fax.
3. You have the right to inspect and copy your health information as applicable by state and local laws. You may incur charges for copies requested.
4. You have a right to request that Cornerstone Montgomery, Inc. amend your health information if you believe that information is incorrect or incomplete. If you disagree with the contents of your medical record, you may also request an amendment to your record. Cornerstone will place that amendment in the medical record unless Cornerstone did not create that part of the record or we believe the existing record is accurate and complete. If Cornerstone grants the amendment, we will notify you and you may request that Cornerstone provide the amendment to other programs and to programs that you identify to us as having already received your medical record. If Cornerstone denies the amendment, we will give you specific reasons for the denial. You may then submit a statement of disagreement and Cornerstone may submit a rebuttal. If you notify us in writing, Cornerstone will attach your request for amendment and our denial to future disclosures of that part of your medical record.
5. You have a right to receive an accounting of disclosures of your health information made by Cornerstone Montgomery, Inc., except that Cornerstone Montgomery, Inc. does not have to account for the disclosures described in treatment, payment, health care operations, disclosures approved by you, required by law and certain government functions.
6. Any of these requests must be in writing and submitted to Cornerstone Montgomery, Utilization Management Department at 6040 Southport Drive, Bethesda, MD 20814. You may request the appropriate form from staff.



Complaints

If you believe that your protected health information has been released in violation of the law, you have the right to file a complaint. You may file a complaint with our program by contacting or submitting a letter to:

HIPAA Compliance Officer
6040 Southport Drive
Bethesda, MD 20814
(301) 493-4200 ext. 238

You may also file a complaint with the U.S. Department of Health and Human Services:

U.S. Department of Health and Human Services
Office for Civil Rights
150 S. Independence Mall West, Suite 372
Public Ledger Building
Philadelphia, PA 19106
Main Line: (215) 861-4441
Hotline: (800) 368-1019
Fax: (215) 861-4431
TDD (215) 861-4440

You have our promise that our program will not retaliate against you if you choose to file a complaint.

How to Send your Medical Record:

If you want to send your protected health information to someone, you must complete and sign authorization Release of Information (ROI). Authorizations may be obtained from Cornerstone Montgomery, Inc.

Changes to this Notice of Privacy Practices

Cornerstone Montgomery, Inc. reserves the right to amend this Notice of Privacy Practices at any time in the future. Until such amendment is made, Cornerstone is required by law to comply with this Notice. When any amendments are made, Cornerstone Montgomery will post the updated version at our program offices and on our website.

Acknowledgment (for use when capturing an electronic signature is not possible)

I have received a copy of the Notice of Privacy Practices of Cornerstone Montgomery.

Signature

Date

Printed name

Date