

**Creative Work Systems**  
**Notice of Privacy Practices**  
Effective April 14, 2003  
Amended September, 2013

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND  
DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION.

**PLEASE REVIEW IT CAREFULLY.**

This Notice describes your rights concerning “protected health information” (PHI) about you. Protected Health Information is information that may identify you and that relates to

- (a) your past, present, or future physical or mental health or condition or
- (b) the past, present or future payment for your health care.

Creative Work Systems has always protected your confidentiality and will continue to do so, as described in this notice. We are required by law to provide you this notice and to abide by the practices outlined in it.

It may be necessary to change the terms of this notice in the future. We reserve the right to make changes and to make the new notice effective for all PHI that we maintain about you, including PHI we created or maintained in the past. If we make material changes to our privacy practices, we will mail all current participants a copy of the revised notice.

**Uses and Disclosures of PHI for Treatment, Payment or Operations**

*For Treatment* – We may use or disclose your health information to a physician or other healthcare provider providing treatment to you. We may also use or disclose your health information to your caseworker and other individuals involved in or directing your care.

*For Payment* – We may use and disclose PHI about you in order to obtain payment for services we provide to you.

*Private Payment* – You may restrict access to your information for CWS general operations if your health care and/or services are paid in full by you or your family member.

*For Operations* – We may use and disclose PHI about you in order to operate our business. For example, operations can include quality assessment, training and accreditation.

**Uses and Disclosures in Special Circumstances**

*Public Health Activities* – We may disclose PHI about you in order to notify public health authorities of public health risks, such as potential exposure to a communicable disease.

*Health Oversight Activities* – We may disclose PHI about you to a health oversight agency for oversight activities, including for investigations relating to treatment and payment.

*Judicial and Administrative Proceedings* – We may disclose PHI in the course of a judicial or administrative proceeding, such as in response to a subpoena, discovery request or other lawful process.

*Law Enforcement* – We may disclose PHI to law enforcement, for purposes such as reporting a crime on our premises or in an emergency.

*Prevention of Serious Harm* – We may use or disclose PHI about you if we believe it is necessary to prevent or lessen serious harm (abuse, neglect or domestic violence) to you or to other potential victims. We may use or disclose PHI when it is necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public.

*Special Events* – We may contact you to inform you of special events or other information that may be of interest to you.

*Workers' Compensation* – We may disclose PHI about you in order to comply with workers' compensation laws.

*Business Associates* - We may disclose PHI to our business associates, such as our accountants or attorneys, if those business associates have signed a written agreement concerning appropriate uses and disclosures of PHI.

*Involvement in Individuals' Care* – We may disclose PHI about you to a family member, close personal friend, or other person identified by you if directly relevant to that person's involvement with your care or payment related to your care. We may also use PHI to notify, or assist in the notification of a family member, close personal friend or other person responsible for your care, of your location, your general condition or death.

*Residential Operations* – We may use or disclose PHI in order to set up residential services for you.

*Disclosures Required by Law* – We will use and disclose PHI about you when we are required to do so by federal, state, or local law.

In the event applicable law, other than HIPAA, prohibits or materially limits our uses and disclosures of PHI, as described above, we will restrict our uses or disclosures of PHI in accordance with the more stringent standard.

### **Uses and Disclosures of PHI Made with Authorization**

Other uses and disclosures of PHI about you will be made only with your written authorization, unless otherwise permitted or required by law as described in this notice. You may revoke your written authorization, at any time, in writing, except to the extent we have taken action in reliance on that written authorization before you revoked it.

### **Your Rights**

*Right to a Paper Copy of this Notice* – This notice will be posted at main business offices and may be posted on our web site. If you would like to have another paper copy of this Notice, send a written request to the CWS Privacy Officer.

*Inspection and Copying* – You have the right to access your information. Certain requests for access to your PHI must be in writing, must state that you want access to your PHI and must be signed by you or your representative. You have the right, upon written notice, to inspect and copy certain PHI that is used to make decision about you, including medical records and billing

records, but not including psycho-therapy notes. We may deny your request to inspect and/or copy in certain limited circumstances; however, you may request a review of our denial by writing to the CWS Privacy Officer. If we provide copies of your PHI, we may charge you the copying costs, including the cost of supplies, labor and mailing. You may request an explanation or summary of the PHI, for which we will charge you the costs of preparing such explanation or summary.

*Amendment* – You may ask us to amend PHI about you if you believe it is incorrect or incomplete. Such requests must be in writing to the Privacy Officer and must include a reason for the request. We may charge you the costs of making such amendment.

*Accounting* – You have the right to request an “accounting of disclosures”, which is a list of certain disclosures we have made of PHI about you other than disclosures you authorized and other than disclosures for treatment, payment or operations. The request must be in writing. The first request for an accounting that you make within a 12-month period is free; however, we may charge you for additional requests within the same 12-month period. We will notify you of the costs of the additional requests, and you may withdraw your request before incurring any costs. This accounting will incorporate disclosures made after April 14, 2003.

*Requesting Restrictions* – You have the right to request restrictions on our use or disclosure of PHI about you. We are bound by our agreement with you except when otherwise required by law, in emergencies, or when the information is necessary for your treatment. Your request must clearly and concisely describe the information you wish restricted, whether you are restricting the use or disclosure or both and to whom you want the limits to apply.

*Alternative Contact* – You have the right to receive communications of PHI about you from us in a certain manner or at a certain location, so long as the request is reasonable. The request must be in writing, submitted to the Privacy Officer.

*Complaints* – If you believe that your privacy rights have been violated, or if you disagree with a decision we made about any requests you made, you may file a complaint with us or with the Department of Health and Human Services. All complaints must be submitted in writing. We will not retaliate in any way if you choose to file a complaint with us or with the Department of Health and Human Services.

**In order to exercise any of your rights as set forth in this Notice, please write to:**

**Sally Mileson**

Privacy Officer  
Creative Work Systems  
619 Brighton Ave.  
Portland, ME 04102

If you have any questions, you may contact the Privacy Officer at (207) 879-1140.

**If you would like a copy of the Health Insurance Portability and Accountability Act (HIPAA), please ask at the front desk.**