



The Support Bridge Counseling and Training Group

**CLEARVIEW COUNSELING AND CONSULTING (CCC LLC)
ROADS AND RIVERS THERAPEUTIC SERVICES (RRTS LLC)
NOTICE OF PRIVACY PRACTICES**

Effective Date: April 14, 2003

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.

CCC LLC and RRTS LLC *are* committed to protecting your personal health information. Personal health information includes any information created or received by CCC LLC or RRTS LLC during the course of/and after treatment. This notice about protecting your health information is required by law. It tells you about your rights and how CCC LLC and RRTS LLC uses and discloses your health information.

Your Health Information Rights

You have certain rights regarding the health information CCC LLC and RRTS LLC has about you. You have the right to:

- Request a restriction on certain uses and disclosures of your health information; however, CCC LLC and RRTS LLC are not required to approve your request.
- Request that CCC LLC and RRTS LLC notify you about your health information in a way or at a location that will help you keep your health information confidential.
- Receive a list of disclosures CCC LLC and RRTS LLC has made of your health information.
- In writing at any time, withdraw your permission for CCC LLC and RRTS LLC to disclose your health information, except for the information that CCC LLC and RRTS LLC disclosed before you stopped your permission.
- Review and obtain a copy of your own health information
- Ask CCC LLC and RRTS LLC to change your health information if you believe it is incorrect or incomplete. CCC LLC and RRTS LLC may deny your request and, if so, will give you the reason(s) why the request was denied.
- Receive a paper or electronic copy of this Notice of Privacy Practices upon request.

A Mental Health Collaborative Connecting Better Service to Better Care

Clearview Counseling and Consulting: clearviewcounselingdenver.com Phone: 970-946-8737
Roads & Rivers Therapeutic Services: roadsnrivers.com Phone: 303-989-5534

If you would like to have a more detailed explanation of these rights or if you would like to exercise one of these rights, contact:

ATTN: Office Manager

Clearview Counseling and Consulting
12835 E. Arapahoe Rd
Tower I, Ste P-850, Centennial, CO 80112
(970) 946-8737

Roads and Rivers Therapeutic Services
1754 N Lafayette St.
Denver, CO 80218
(303) 989-5534

How CCC LLC May Use or Disclose Your Health Information

The law permits CCC LLC and RRTS LLC to use or disclose your health information for the following purposes:

For Treatment, CCC LLC and RRTS LLC may use and disclose your health information to help you receive mental/medical health and services.

For example: CCC LLC and RRTS LLC may use your mental/medical health information to review and approve hospital care, or conduct treatment coordination with funding sources.

For Payment, CCC LLC and RRTS LLC may use and disclose your health information to sequester payment for services rendered.

For Example, A third party may be contacted regarding the receipt of delinquent payments

For Requirements by Law, CCC LLC and RRTS LLC may use and disclose your health information when the law requires it.

For example: CCC LLC and RRTS LLC may disclose information for the following purposes:

- To reply to proper requests for your health information from a court or other legal agency.
- To report information for public health, such as reporting victims of abuse, neglect or domestic violence or reporting to the Food and Drug Administration problems with products or reactions to medications.
- To report information for public safety, such as to prevent the spread of a serious threat to the health or safety of a particular person or the general public.
- To assist law enforcement officials, such as the police, in their law enforcement duties.
- To allow funeral directors, medical examiners, or coroners to carry out their lawful duties, such as to complete a death certificate for the state.
- To comply with laws and regulations related to Workers' Compensation.
- To allow other government agencies to provide you with benefits and services.

For Health Oversight Activities, CCC LLC and RRTS LLC may disclose your health information to agencies for health oversight reasons, such as program audits or licensure reviews.

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Obligations of Clearview Counseling and Consulting and Roads and Rivers Therapeutic Services

CCC LLC and RRTS LLC are required to:

- Maintain the privacy of your protected health information.
- Provide you with this Notice of its legal duties and privacy practices with respect to your health information.
- Obtain your written authorization to use or disclose your health information for reasons other than those listed in this Notice and permitted under law.
- Abide by the terms of this Notice that are currently in effect.
- Notify you if CCC LLC and RRTS LLC are unable to agree to a requested restriction on how your information is used or disclosed.
- Allow reasonable requests you may make to notify you about your health information in a way or at a location that will help you keep your health information confidential.

Complaints

If you have a complaint about this Notice of Privacy Practices, how CCC LLC or RRTS LLC handles your health information, or if you otherwise believe that your privacy rights have been violated by CCC LLC or RRTS LLC, your complaint should be directed to:

Attention: Privacy Official

Clearview Counseling and Consulting
12835 E Arapahoe Rd - Tower I, Ste P-850
Centennial, CO 80112
(970) 946-8737

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1754 N Lafayette St
Denver, CO 80218
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If you are not satisfied with the manner in which CCC LLC or RRTS LLC handles a complaint, you may submit a formal complaint to the U.S. Secretary of Health and Human Services in Washington, DC. There will be no retaliation by Clearview Counseling and Consulting or Roads and Rivers Therapeutic Services if you file a complaint.

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Acknowledgement of Receipt of Notice of Privacy Rights

Name of Client: _____

I hereby acknowledge that I have received/reviewed a copy of the above agency's Notice of Privacy Rights.

Signature: Client/Guardian/Custodian

Date

If not the client, please print name and state legal authority to sign for the client

-----For Agency Use Only-----

Clearview Counseling and Consulting and Roads and Rivers Therapeutic Services Notice of Privacy Rights was presented to client/legal guardian/custodian, but the client/legal guardian/custodian did not sign because:

_____ Client refused to sign

_____ The legal guardian/custodian refused to sign

_____ The client/guardian/custodian was unable to sign

_____ Other

Signature of Staff

Date

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