

Dr. Rick Barnett, Psy.D., LADC / BPS Health, LLC
Notice of Privacy Practices
Health Insurance Portability and Accountability Act (HIPAA)

Dr. Rick Barnett, Psy.D., LADC and BPS Health, LLC have the responsibility to protect the privacy of your personal and health information, as described in this notice. Personal and health information includes psychological (or medical) information and individually identifiable information, such as your name, address, telephone or social security number. Dr. Rick Barnett is required by applicable federal and state laws to maintain the privacy of your personal and health information or "PHI".

Dr. Rick Barnett will protect your privacy by, limiting how your PHI is used or disclosed; limiting who may see your PHI; inform you of our legal duties with respect to your PHI; and explain and strictly adhere to privacy policies. These policies are in effect as of April 14, 2003, and will remain in effect until updated and until you receive notice of any changes. Dr. Rick Barnett reserves the right to change these policies and the terms of this notice as allowed by state and federal laws, rules or regulations.

Uses and Disclosures of Client Personal and Health Information:

Dr. Rick Barnett may disclose your PHI to insurance carriers in order to receive payment for claims for services provided to you by Dr. Rick Barnett or BPS Health, LLC within the limits established by the Vermont State Board of Psychological Examiners or other applicable licensing board.

Dr. Rick Barnett may use your PHI to conduct quality improvements, including outcome studies and development of clinical guidelines, care coordination, case management or utilization management activities. Dr. Rick Barnett may also use your PHI to review the competence of clinicians working under the supervision of Dr. Barnett, or for business purposes such as customer service, resolution of your complaints, due diligence in connection with the sale or transfer of assets to a potential successor in interest.

Dr. Rick Barnett may use your PHI to contact you with information about services provided, appointment reminders, or for collection of co-pays or your account balance (if any).

Dr. Rick Barnett may use your PHI to the extent necessary to avert a serious and imminent threat to your health or safety or the health and safety of others. This information may be disclosed to the proper authorities, it is reasonably believed that you are a possible victim of abuse, neglect, domestic violence or other crimes or if you admit to the abuse or neglect of a child or dependent elderly person.

Dr. Rick Barnett must disclose your PHI when required to do so by U.S. Department of Health and Human Services upon request for purposes of determining compliance with privacy laws.

Dr. Rick Barnett may disclose your PHI in response to a court order or subpoena, although every effort will be made to obtain your consent for the release of any personal or health information, as required by confidentiality regulations as set by the Vermont Board of Psychological Examiners or other applicable licensure boards.

Dr. Rick Barnett may disclose your PHI to law enforcement officials or personnel of a correctional institutional if you are in lawful custody while receiving treatment.

Your Rights:

You have the right to review or obtain copies of your personal and health information, subject to the limitations of the Vermont Board of Psychological Examiners. Requests must be in writing and there you may be a fee charged.

You have the right to request and receive a list of instances in which Dr. Rick Barnett, or subcontractors disclosed your PHI for purposes other than treatment, claims processing, and organizational operations.

You have the right to request that additional restrictions are placed on the use or disclosure of your PHI. Dr. Barnett is not required to agree to these additional restrictions, but if so, he will abide by the agreement. You also have the right to terminate or amend previously requested restrictions. Requests for additional restrictions or request for termination of requested restrictions must be in writing.

You have the right to request alternative means of communication with you in confidence about your PHI, such as sending reminders for appointments by mail instead of telephone calls. You must specify how you wish to be contacted in writing, if you do not wish to be telephoned at your primary or secondary listed telephone numbers.

You have the right to request an amendment of your PHI. The request must be in writing and include the information to be amended. Your request for an amendment may be denied if the information you want amended is not available, maintained, accurate and/or complete. If the amendment is agreed upon, a reasonable effort will be made to inform others of the amendment and to include the changes in any future disclosures of that information.

You have the right to receive a copy of this notice in either written or electronic form.

You have the right to file a complaint if you believe we have violated your privacy rights or you disagree with a decision we made about access to your PHI. A complaint may be registered with Dr. Rick Barnett. You may also submit a written complaint to the U.S. Department of Health and Human Services (HHS) or the Vermont Board of Psychological Examiners. Dr. Rick Barnett supports your right to file a complaint and will assist you by providing address information for filing a complaint, and he will not retaliate in any way if you choose to file a complaint with him or the Vermont Board of Psychological Examiners or HHS.

Written Authorization to Use or Disclose Your PHI:

Dr. Rick Barnett will request written authorization from you to use your PHI or to disclose it to anyone for any purpose or situation not included in this document. You may revoke this authorization in writing at any time. Your revocations will not affect any use or disclosure permitted by your authorization while it was in effect. He will not disclose your PHI for any reason except those described in this notice without your written consent.

If you have been referred to Dr. Rick Barnett through an Employee Assistance Program (EAP), your PHI will not be disclosed to your employer or anyone else without written authorization to do so. If you have accessed your EAP due to employer-mandated referral, you will be notified of the consequences of not authorizing the share of information between the employer and Dr. Rick Barnett. Personal information shared in these instances, are generally of a summary type (such as, restriction from duty, return-to-work, etc.), without specific private or confidential information as determined by Dr. Rick Barnett. Dr. Rick Barnett may provide your employer with EAP utilization data without identifying any of your PHI. Utilization data includes number of individuals accessing their EAP benefit and other quantitative data and guarantees the privacy and confidentiality of employee participants.

Questions or Complaints Regarding Use or Disclosure of PHI:

You may contact the Dr. Rick Barnett regarding questions or complaints regarding the use or disclosure of your PHI. Dr. Rick Barnett can be contacted directly at 802-373-2909 or fax at 888-923-3476. You can also email him at drrick@bpshealth.com or in writing at 56 Old Farm Rd, Stowe, VT 05672.

Acknowledgement of This Notice of Privacy Regarding Your PHI:

Your acknowledgement of this notice of privacy will be made a part of your medical record at Dr. Rick Barnett. Please sign and date below. You may request a copy of this notice at any time.

Patient/Client Name

Date

Signature of Patient/Client or Legal Guardian (if minor)