

George J. Joumas, M.A., L.P.C.**Joumas Consulting**

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Individual, Couple & Family Therapy
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THIS NOTICE DESCRIBES HOW MEDICAL, MENTAL HEALTH AND DRUG AND ALCOHOL RELATED INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

General Information

Information about your treatment and care, including payment for care, is protected by two federal laws: The Health Insurance Portability and Accountability Act of 1996 (“HIPAA”)* and the Confidentiality Law**. Under these laws George J. Joumas M.A. / Joumas Consulting may not say to a person outside of George J. Joumas M.A. / Joumas Consulting that you receive services from George J. Joumas M.A. / Joumas Consulting nor may George J. Joumas M.A. / Joumas Consulting disclose any information identifying you as an alcohol or drug abuser, or disclose any other protected information except as permitted by the federal laws referenced below.

George J. Joumas M.A. / Joumas Consulting must obtain your written consent before it can disclose information about you for payment purposes. For example, George J. Joumas M.A. / Joumas Consulting must obtain your written consent before it can disclose information to your health insurer in order to be paid for services. Generally, you must also sign a written consent before George J. Joumas M.A. / Joumas Consulting can share information for treatment purposes or for health care operations. However, federal law permits the program to disclose information in the following circumstances without your written permission:

1. To George J. Joumas M.A. / Joumas Consulting staff for the purposes of providing treatment and maintaining the clinical record;
2. Pursuant to an agreement with a business associate (e.g., record storage services, billing services);
3. For research, audit or evaluations (e.g. State licensing review, accreditation, program data reporting as required by the State and/or Federal government);
4. To report a crime committed on clinic premises or against George J. Joumas M.A. / Joumas Consulting personnel;
5. To medical personnel in a medical/psychiatric emergency;
6. To appropriate authorities to report suspected child abuse or neglect;
7. To report certain infectious illnesses as required by state law;
8. As allowed by a court order.

Before George J. Joumas M.A. / Joumas Consulting can use or disclose any information about your health in a manner which is not described above, it must first obtain your specific written consent allowing it to make the disclosure. Any such written consent may be revoked by you in writing. (NOTE: Revoking a consent to disclose information to a court, probation department, parole office, etc. may violate an

agreement that you have with that organization. Such a violation may result in legal consequences for you.)

* 42 U.S.C. § 130d et. seq., 45 C.F.R. Parts 160 & 164

** 42 U.S.C. § 290dd-2, 42 C.F.R. Part 2

Under HIPAA you have the right to request restrictions on certain uses and disclosures of your health and treatment information. The program is not required to agree to any restrictions that you request, but if it does agree with them, it is bound by that agreement and may not use or disclose any information which you have restricted except as necessary in a medical emergency.

You have the right to request that we communicate with you by alternative means or at an alternative location (e.g. another address). George J. Joumas M.A. / Joumas Consulting will accommodate such requests that are reasonable and will not request an explanation from you.

Under HIPAA you also have the right to inspect and copy your own health and treatment information maintained by George J. Joumas M.A. / Joumas Consulting, except to the extent that the information contains psychotherapy notes or information compiled for use in a civil, criminal or administrative proceeding or in other limited circumstances.

Under HIPAA you also have the right, with some exceptions, to amend health care information maintained in the program's records, and to request and receive an accounting of disclosures of your health related information made by the program during the six (6) years prior to your request. If your request to any of the above is denied, you have the right to request a review of the denial by George J. Joumas M.A. / Joumas Consulting. To make any of the above requests, you must fill out the appropriate form that will be provided by the George J. Joumas M.A. / Joumas Consulting. You also have the right to receive a paper copy of this notice.

The Use of Your Information at George J. Joumas M.A. / Joumas Consulting

In order to provide you with the best care, the program will use your health and treatment information in the following ways:

Communication among program staff (including students or other interns) for the purposes of treatment needs, treatment planning, progress reporting and review, staff supervision, incident reporting, medication administration, billing operations, medical record maintenance, discharge planning, and other treatment related processes. Communication with Business Associates such as billing services, record storage services, long term record storage.

George J. Joumas M.A. / Joumas Consulting Duties:

George J. Joumas M.A. / Joumas Consulting is required by law to maintain the privacy of your health information and to provide you with notice of its legal duties and privacy practices with respect to your health information. George J. Joumas M.A. / Joumas Consulting is required by law to abide by the terms of this notice. George J. Joumas M.A. / Joumas Consulting reserves the right to change the terms of this notice and to make new notice provisions effective for all protected health information it maintains.

George J. Joumas M.A. / Joumas Consulting will provide current patients with an updated notice, and will provide affected former patients with new notices when substantive changes are made in the notice.

How We Collect Information About You:

George J. Joumas, M.A., L.P.C - Joumas Consulting and its employees and volunteers collect data through a variety of means including but not necessarily limited to letters, phone calls, emails, voice mails, and from the submission of applications that is either required by law, or necessary to process applications or other requests for assistance through our organization.

What We Do Not Do With Your Information:

Information about your financial situation and medical conditions and care that you provide to us in writing, via email, on the phone (including information left on voice mails), contained in or attached to applications, or directly or indirectly given to us, is held in strictest confidence. We do not give out, exchange, barter, rent, sell, lend, or disseminate any information about applicants or clients who apply for or actually receive our services that is considered patient confidential, is restricted by law, or has been specifically restricted by a patient/client in a signed HIPAA consent form.

How We Do Use Your Information:

Information is only used as is reasonably necessary to process your application or to provide you with health or counseling services which may require communication between IHSN and health care providers, medical product or service providers, pharmacies, insurance companies, and other providers necessary to: verify your medical information is accurate; determine the type of medical supplies or any health care services you need including, but not limited to; or to obtain or purchase any type of medical supplies, devices, medications, insurance.

If you apply or attempt to apply to receive assistance through us and provide information with the intent or purpose of fraud or that results in either an actual crime of fraud for any reason including willful or un-willful acts of negligence whether intended or not, or in any way demonstrates or indicates attempted fraud, your non-medical information can be given to legal authorities including police, investigators, courts, and/or attorneys or other legal professionals, as well as any other information as permitted by law.

Information We Do Not Collect:

We do not use cookies on our website to collect data from our site visitors. We do not collect information about site visitors except for one hit counter on the main index page (www.JoumasConsulting.com) that simply records the number of visitors and no other data. We do use some affiliate programs that may or may not capture traffic data through our site. To avoid potential data capture that you visited simply do not click on any of our outside affiliate links.

Complaints and Reporting Violations

Patients have the right to make a complaint about the Confidentiality and Privacy of their Health Information. The patient may complete a Privacy Complaint form and submit the form to the:

Department of Health and Human Services
Office of Civil Rights
Hubert Humphrey Bldg.
200 Independence Avenue,
S, W, Room 509F
HHH Building
Washington, DC 20201

You will not be retaliated against for filing such a complaint. Violation of the Confidentiality law by a program is a crime. Suspected violations of the Confidentiality Law may be reported to the United States Attorney in the district where the violation occurs.