

 <p><b>Catholic Charities</b> Archdiocese of San Antonio, Inc.</p>	<p style="text-align: center;">NOTICE OF PRIVACY PRACTICES</p> <p style="text-align: center;">HEALTH INSURANCE PORTABILITY &amp; ACCOUNTABILITY ACT (HIPAA)</p> <p>Effective Date: 2/15/2022</p>
---	--

THIS NOTICE PROVIDES INFORMATION RELATED TO THE HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA) AND OTHER LEGAL REQUIREMENTS REGARDING PROTECTED HEALTH INFORMATION (PHI).

**HERE IS WHAT YOU SHOULD KNOW ABOUT:**

**Catholic Charities Responsibilities**      **We are required by law to:**

- Keep the privacy and security of your PHI.
- Tell you quickly if a breach threatens your PHI
- Abide by this notice and give you a copy of it
- Only use your information as we share in this notice and if you tell us we can. You can change your mind
- Share changes to this notice in our office, on our web site, and if you ask
- Be sure that to share certain information we go an extra step in getting your okay

**Your Rights**      **You have a right to:**

- Get a copy of your own paper or electronic record
- Ask us to change your paper or electronic record
- Ask us to contact you a certain way
- Ask us to limit what we share
- Get a list of who we gave information about you to
- Get a copy of this notice
- Choose someone to act for you
- File a complaint if you believe we shared your information illegally

**Your Choices**      **Clients, or parents/guardians of minor clients, of Catholic Charities of San Antonio have the right to choose the way that the agency uses and shares information including in cases of:**

- Inquiry from family and friends
- Providing disaster relief
- Including identifying information in a directory
- Providing mental health care
- Marketing services and selling information
- Raising funds

**Use & Disclosure of your information**      **Catholic Charities of San Antonio may use and share information in the normal processes of:**

- Treatment
- Agency operations
- Billing for services
- For public health and safety
- For research purposes
- To comply with the law or respond to lawsuits and legal actions

- To respond to organ and tissue donation requests
- To work with a medical examiner or funeral director
- To address workers' compensation, law enforcement, and other government requests

**Information Privacy & Security:**

**You should know:**

- We use standard safeguards to protect your electronic PHI
- Laptops computers are encrypted
- All agency computers and laptop hard drives are password protected
- Some areas use third party cloud based systems that are password protected
- Our website is hosted by a third party vendor and may be subject to their privacy and/or data policies.
- Our website contains links to sites outside of Catholic Charities. These sites are not under the control of Catholic Charities and posting does imply endorsement of privacy nor content
- We contract with an outside vendor to ensure industry-standard encryption technologies when transferring and receiving consumer data exchanged within our site,
- Personal information collected at these pages are: Name, Address, Email address, Phone Number, Credit/Debit Card information, etc. We do not share this information with outside parties except to the extent necessary to complete the web request
- We collect the domain name and email address (where possible) of visitors to our Web page, aggregate information on what pages consumers access or visit and information volunteered by the consumer, such as survey information and/or site registrations.
- Client records are locked in secured areas
- Video cameras are used in common areas, outside, and other high traffic areas of main buildings
- There are also video cameras in common areas and outside of sites where clients are housed
- Staff and clients are not to connect with each other on social media
- Staff should not name or mention you or your case on social media
- Staff are expected to always keep your case and name private

**For Information or Complaints**

Visit the below websites or see the information on last page of this notice:

- Health Insurance Portability & Protection (HIPAA): [www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html](http://www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html)
- Texas Medical Records Privacy Act: <https://www.texasattorneygeneral.gov/cpd/list-of-regulatory-agencies>

**For more information concerning Catholic Charities of the Archdiocese of San Antonio's Privacy Practices contact:**

**Angela Mora**  
**Director of Quality and**  
**Compliance**  
**210-222-1294**  
**amora@ccaosa.org**

**Changes to the Terms of this Notice**

We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, in our office, and on our web site.

---

## *Our Responsibilities*

---

### **We are required by law to:**

- Maintain the privacy and security of your PHI whether oral, written, or electronic.
- Let you know promptly if a breach occurs that may have compromised the privacy or security of your information
- Follow the duties and privacy practices described in this notice and give you a copy of it. This notice will generally be given to you at program enrollment. You may access this notice from our website. You can also obtain a copy at any time that you request it.
- Only use or share your information as described here unless you tell us in writing that we can share it in other ways. If you agree that we can share it in other ways, you can change your mind at any time by letting us know in writing.
- Let you know that if your PHI is shared in a written marketing mail out, the mail out must include the name and toll free number of the entity that sent it along with the steps to remove your name from the mailing list. Also, the mail out should only show your name and the senders name.
- Have reasonable safeguards to ensure that your PHI is secure in accordance with the HIPAA Security Rule.
- Let you and HHS know if we or our Business Associate shares your PHI without permission other than for reasons listed on this notice in accordance with the HIPAA Breach Notification Rule
- Abide by other Texas laws that serve as a protection from sharing specific types of information including certain doctor-patient communications, genetic information, test results for HIV and AIDS, hospital records, pharmacy records, donor records, regulatory records and mental health records. In these cases we will only share your PHI with you or your guardian's specific consent.

### Changes to the Terms of Notice

This notice is subject to change at any time there are changes to our practices in order to comply with all applicable laws and requirements. Should the terms of this notice change, the changes will apply to all information we have about you. The new notice will be available upon request, in our office, and on our web site. It may also be mailed by request.

---

## *Your Rights*

---

### **You have the right to:**

#### Get a copy of your own paper or electronic record

- You can ask to see or get an electronic or paper copy of your medical record and other PHI we have about you. Ask us how to do this.
- We will provide a copy or a summary of your PHI, usually within 15 days of your request. We may charge a reasonable, cost-based fee.
- We have the right to charge for the reasonable costs of copying and mailing your records if you request copies and mailing. We will not charge a retrieval fee.
- If the information requested was originally in electronic format then we must provide the request electronically unless you have agreed to accept the records in another form.

#### Ask us to change your record

- You can ask us to correct PHI about you that you think is incorrect or incomplete. Ask us how to do this.
- We may say "no" to your request, but we'll tell you why in writing within 15 days.
- You may request to add a "statement of disagreement" and ask that it be sent with future disclosures. Ask about our policy on this.

#### Ask us to contact you a certain way

- This is called requesting "confidential communication"

- You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address.
- We will make efforts to work with a reasonable request

#### Ask us to limit what we share

- You can ask us not to use or share certain PHI for treatment, payment, marketing, or our operations. We are not required to agree to your request, and we may say “no” if it would affect your care.
- If you pay for a service or health care item out-of-pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer. We will say “yes” unless a law requires us to share that information.
- In general, your health information cannot be used or shared for marketing communications without your authorization. Certain exceptions may apply.

#### Get a list of who we gave information about you to

- You can ask for a list (accounting) of the times we’ve shared your PHI for six years prior to the date you ask, who we shared it with, and why.
- We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We will provide one accounting a year for free but will charge a reasonable, cost-based fee if you ask for another one within 12 months.

#### Get a copy of this notice

- You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.

#### Choose someone to act for you

- If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your PHI.
- We will check with the person that has this authority and can act for you before we take any action.
- We will not retaliate against you for filing a complaint.

#### To File a Complaint

- Under the Texas Medical Records Privacy Act, consumers have the right to file a complaint with the state agencies that regulate covered entities as well as with the Texas Attorney General. See the Complaint section at the end of this notice for instructions on filing a complaint.
- You can also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting [www.hhs.gov/ocr/privacy/hipaa/complaints/](http://www.hhs.gov/ocr/privacy/hipaa/complaints/)

---

### *Your Choices*

---

**For certain PHI, you can tell us your choices about what we can share. You can also tell us how we can share your information. In cases listed below, tell us what you want us to do, and we will follow your instructions.**

#### In these cases, you have both the right and choice to tell us to whether or not to:

- Share information with your family, close friends, or others involved in your care
- Share information about receiving mental health care
- Share information in a disaster relief situation
- Include your information in a directory

*\*If you are not able to tell us what to do, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious threat to health or safety.*

In these cases we **never** share your information unless you give us written permission:

- Marketing purposes
- Sale of your information
- Most sharing of psychotherapy notes
- Research involving your personal information that is not aggregated nor de-identified

In the case of fundraising:

- We may contact you for fundraising efforts, but you can tell us not to contact you again.

---

### *How We Use & Disclose Your Information*

---

**We typically use or share your PHI in order to:**

Treat you

- We can use your PHI and share it with other professionals who are treating you.

Run our organization

- We can use and share your PHI to run our practice, improve your care, and contact you when necessary.
- To perform certain insurance or health care maintenance organizational functions

Bill for your services

- We can use and share your PHI to bill and get payment from health plans or other entities.

---

### *Other Uses & Disclosures*

---

We are allowed and at time may be required to share your information in other ways – usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes.

See [www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html](http://www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html) for more information.

Help with public health and safety issues

**We can share PHI about you for certain situations such as:**

- Preventing disease
- Helping with product recalls
- Reporting adverse reactions to medications
- Reporting suspected abuse, neglect, or domestic violence
- Preventing or reducing a serious threat to anyone’s health or safety
- Disclosures in connection with a health oversight agency for audits and investigations, a threat to public safety
- In an emergency where you are not able to tell us what to do, and in the exercise of reasonable judgment we believe that this is in your best interests.
- If required by law, including a subpoena or court order.

Do research

- We can use or share your information for health research. Unless it is in aggregate and de-identified, it is our practice to request your permission to share your personal information even in this case.

Comply with the law

- We can share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law.

Respond to organ and tissue donation requests

- We can share PHI about you with organ procurement organizations.

Work with a medical examiner or funeral director

- We can share PHI with a coroner, medical examiner, or funeral director when an individual dies.

To address workers' compensation, law enforcement, and other government requests

**We can use or share PHI about you:**

- For workers' compensation claims
- For law enforcement purposes or with a law enforcement official
- With health oversight agencies for activities authorized by law
- For special government functions such as military, national security, and presidential protective services

Respond to lawsuits and legal actions

- We can share PHI about you in response to a court or administrative order, or in response to a subpoena.

Abuse, Neglect or Domestic Violence

- In certain circumstances, covered entities may disclose PHI to appropriate government authorities regarding victims of abuse, neglect, or domestic violence

---

*Covered Locations and Entities:*

---

This notice is applicable to all locations and services covered by Catholic Charities, Archdiocese of San Antonio. *In general,*

*before we share your information with a Business Associate the following three requirements must be met:*

- Both we and the Business Associate must currently have or have had a relationship with you (can be a past or present)
- The PHI requested must pertain to that relationship
- The discloser must disclose only the minimum information necessary for the health care operation to accomplish the purpose of the use, disclosure or request.

---

*Information Security:*

---

Catholic Charities uses many methods to ensure that our systems are secure including. Some of these safeguards include:

- We currently use firewalls, anti-virus, and access control tools
- We maintain a regular schedule to back up data
- Our website is hosted by a third party vendor. Information collected here may be subject to third-party privacy and/or data policies.
- All agency laptops are encrypted.

- All agency computers are password protected
- We do use some cloud based systems which are password protected
- Client records are locked in secured areas with limited key only access.
- Video cameras are used in common areas, outside, and other high traffic areas of main buildings.
- There are also video cameras in common areas and outside of residential sites.
- Staff and clients are not to contact each other on social media
- Staff should not name or mention you or your case on social media.
- Staff are expected to always keep your case details and name private including when talking, using your files, and online.

---

*To Express A Complaint:*

---

If you believe your PHI as described under Texas Medical Records Privacy Act, has been shared in violation of the this Act you have the right to file a complaint with the state agencies that regulate covered entities as well as with the Texas Attorney General. For a list of those agencies, contact information and detailed information regarding each agency's complaint process, see the link below:

<https://www.texasattorneygeneral.gov/cpd/list-of-regulatory-agencies>

***For more information on your rights under HIPAA see:***

[www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html](http://www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html)

***If you believe your PHI has been used or disclosed in violation of HIPAA, you have the right to complain to the federal Office of Civil Rights which has authority to investigate complaints against HIPAA covered entities and their business associates:***

Office for Civil Rights  
U.S. Department of Health and Human Services  
200 Independence Avenue, S.W.  
Room 509F; HHH Bldg.  
Washington, D.C. 20201

Region VI - Dallas (Arkansas, Louisiana, New Mexico, Oklahoma, Texas)  
Ralph Rouse, Regional Manager  
Office for Civil Rights  
U.S. Department of Health and Human Services  
1301 Young Street, Suite 1169  
Dallas, TX 75202  
Voice Phone (214) 767-4056  
FAX (214) 767-0432  
TDD (214) 767-8940

**You may also file a complaint by contacting the Medicaid Hotline at 1-800-252-8263. For more information concerning Catholic Charities, Archdiocese of San Antonio's Privacy Practices**

**Angela Mora**  
**Director of Quality and Compliance**  
**210-222-1294**  
**amora@ccaosa.org**