

## **Twelve Way Foundation**

Effective October 16, 2019

### **I. Organizational Privacy Policy**

This Privacy Policy describes how health information about you may be used and disclosed by Twelve Way Foundation, how you can get access to this information, and certain obligations we have regarding the use and disclosure of health information. Please review it carefully.

If you have any questions about this notice, please contact Twelve Way Foundation Recovery Support Privacy Officer at (903) 935-4115 or in writing at:

Attention-Privacy Officer  
Twelve Way Foundation Recovery Support  
Services  
3901 Elysian Fields Avenue  
Marshall, TX 75672

We construct a record of the care and services you receive at Twelve Way Foundation for Recovery Support Services to offer residents valued care and to comply with certain legal requirements. This notice will tell you about the possible ways in which we may use and disclose your health information from this record.

We are required by the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and the Health Information Technology for Economic and Clinical Health Act (HITECH), found in Title XII of the American Recovery and Reinvestment Act of 2009, collectively referred to as "HIPAA laws," to:

Make sure that health information that identifies you is kept private

Give you this notice of our legal duties and privacy practices with respect to health information about you and describe how you can get access to the information

Follow the terms of the Privacy Policy that is currently in effect.

### **Our Pledge Regarding Your Health Information**

Any information you share with staff members in regards programs of Twelve Way Foundation on Recovery Support Services is important to us, and we pledge to keep it as confidential as possible. This rule applies to all employees, programs, and services operated by Twelve Way Foundation on Recovery Support Services.

By law, there are some exceptions to this rule, and these are listed below. With the exception of these items, we pledge to maintain maximum confidentiality. Any releases of information which are permitted by HIPAA but are prohibited by federal and state regulations and law continue to be prohibited.

## **Permitted Uses and Disclosures**

### **Exception 1: To Improve the Quality of Treatment**

We may use health information about you to provide you with other clinical or health services. We may disclose health information about you to staff, board, medical facilities, nursing home, partnering institutions or others who are involved in taking care of you at Twelve Way Foundation in Recovery Support Services. For example, if you are referred to another program within our agency, your new provider and/or support staff will know about your needs and goals without having to ask you to repeat your story.

We may also disclose health information about you to physicians, other practitioners and providers, and other health care facilities outside Twelve Way Foundation on Recovery Support Services for their use in treating you. In Texas, laws protecting information regarding substance abuse treatment are more stringent, and we will limit access to your data in keeping with those laws.

### **Exception 2: To Improve the Internal Operations of Our Organization**

We may use and disclose clinical or identifying information about you to improve internal operations. These uses and disclosures are necessary to run the organization and ensure that all of our patients receive quality care. For example, we may use information to review our treatment and services and to evaluate the performance of our staff and programs in caring for you. We may also provide minimal information to support staff to assist in directing you to the services you need.

Additionally, we may use and disclose health information to tell you about health-related benefits or services that may be of interest to you. We also believe that friends or family members may be helpful to you in reaching your goals. Where you indicate to us in writing that you want them to have access to information, we will talk to them and release information as authorized. Only persons you indicate will have this type of access.

### **Exception 3: To Your Insurance or Responsible Party to Receive Payment (Out-of-State Patients)**

In the case that insurance is or become applicable to your recovery, your insurance carrier will need to know some basic details about your condition and the services provided. Worker's Compensation and military insurances may have special needs for information. This information is limited by state and federal law, and

we will provide them the minimal necessary information when we receive your written approval at the time of admission to bill your insurer and provide this information.

#### **Exception 4: To Our Business Associates**

We may disclose your health information to our business associates and allow them to create, use, and disclose your health information to perform their job. For example, we may disclose your health information to an outside billing company that assists us in billing insurance companies (out-of-state patients). We may share information for utilization and quality assessment activities with other members of the health system as appropriate. Twelve Way Foundation on Recovery Support Services will abide by the terms of this Notice of Privacy Practice in using information for treatment, payment, and operations.

#### **Exception 5: Serious Threat to Health or Safety**

We may use and disclose health information about you when necessary to prevent a serious threat to your health and safety or the health and safety of the public or another person. Any disclosure, however, would only be to someone able to help prevent the threat.

#### **Exception 6: As Required by Law**

We will disclose health information about you when required to do so by federal, state, or local law. For example, if you are involved in a lawsuit or a legal dispute, we may disclose health information about you in response to a court or administrative order, but only if efforts have been made to tell you about the request or to obtain an order protecting the information requested.

We may release health information if asked to do so by a law enforcement official:

In response to a court order, subpoena, warrant, summons, or similar process

To identify or locate a suspect, fugitive, material witness, or missing person

About the victim of a crime, if, under certain limited circumstances, we are unable to obtain the person's agreement

About a death we believe may be the result of criminal conduct

About criminal conduct at Twelve Way Foundation on Recovery Support Services.

In emergency circumstances to report a crime, the location of the crime or victims, or the identity, description, or location of the person who committed the

crime. Also, we may release health information about you to authorized federal officials for intelligence, counterintelligence, and other national security activities authorized by law.

To identify a deceased person or to determine a cause of death, we may disclose information to a coroner, medical examiner, and funeral directors (as necessary to carry out their duties).

We may identify you by name and location in accordance with federal, state, and local laws. In Texas, laws governing substance abuse treatment facilities may not permit this disclosure except under certain conditions, and we will adhere to those laws in those facilities.

### **Exception 7: As Required by Law for Public Health Activities**

The law also requires us to disclose health information about you for public health activities. These activities generally include prevention or control of disease, injury, or disability; reporting deaths; reducing reactions to medications or problems with products; notifying people of recalls of products they may be using; and notifying a person who may have been exposed to a disease or may be at risk for contracting or spreading a disease or condition.

### **Exception 8: As Required by Law for Victims of Abuse or Neglect**

We may disclose your health information to a public health authority authorized by law to receive reports of child abuse or neglect. In addition, if we believe that you have been a victim of abuse, neglect, or domestic violence, we may disclose your health information to the governmental entity or agency authorized to receive such information. In this case, the disclosure will be made consistent with the requirements of applicable federal and state laws.

### **Exception 9: For Research, Under Certain Circumstances**

Under certain circumstances, we may use or disclose your health information for research, subject to certain safeguards. For example, we may disclose information to researchers when their research has been approved by a special committee who has to review the research proposal and established protocols to ensure the privacy of your health information. We may disclose health information about you to people preparing to conduct a research project; however, the information will stay on site.

### **Exception 10: Other Uses and Disclosures**

Other Permitted and Required Uses and Disclosures will be made only with your consent, authorization, or opportunity to object unless otherwise required by law. For example, we may use and disclose health information for certain health promotion activities, and your name and address may be used to send you a general newsletter or

specific information based on your own health concerns; however, any fundraising or health promotion communication sent to you will let you know how you can exercise your right to opt out of receiving similar communications in the future.

### **Exception 11: Uses and Disclosures Requiring Permission**

Other uses and disclosures of health information not covered by this notice or the laws that apply to us will be made only with your written permission. For example, subject to certain limited exceptions, your written permission is required for any sale of health information, and most uses and disclosures of psychotherapy notes require your written permission as well.

If you provide us with permission to use or disclose health information about you, you may revoke that permission, in writing, at any time. If you revoke your permission, we will no longer use or disclose health information about you for the reasons covered by your written authorization. You understand that we are unable to take back any disclosures we have already made with your permission and that we are required to retain our records of the care that we provided to you.

### **Your Rights Regarding Health Information About You**

You have the following rights regarding health information we maintain about you:

#### **Right to Inspect and Copy**

You have the right to inspect and copy health information that may be used to make decisions about your recovery. This information usually includes health and billing records; however, it does *not* include psychotherapy notes and other mental health records except under certain circumstances.

To inspect and copy health information that may be used to make decisions about you, you must submit your request in writing to:

Byron Butts, Executive Director  
Twelve Way Foundation Recovery Support  
Services  
3901 Elysian Fields Avenue  
Marshall, TX 75672

If you request a copy of the information, we may charge a fee for the costs of copying, mailing, or other supplies associated with your request. If you agree, we may provide you with a summary of the information instead of a copy of your entire record or with an explanation of the information instead of a copy. Before providing you with such a summary or explanation, we first will obtain your agreement to pay the fees, if any, for preparing the summary or explanation.

We may deny your request to inspect and copy your health information in certain very limited circumstances, such as when your physician determines that for health reasons this is not advisable. If you are denied access to health information, you may request that the denial be reviewed. Another licensed health care professional chosen by the organization will review your request and the denial. The person conducting the review will not be the person who denied your request, and we will do what the reviewer decides.

### **Right to Amend**

If you feel that health information we have about you is incorrect or incomplete, you may ask us to amend the information. You have the right to request an amendment for as long as the information is kept by or for Twelve Way Foundation on Recovery Support Services

To request an amendment, send your request in writing to:

Byron Butts, Executive Director  
Twelve Way Foundation Recovery Support  
Services  
3901 Elysian Fields Avenue  
Marshall, TX 75672

You must provide a reason in support of your request.

We may deny your request for an amendment if it is not in writing or does not include a reason to support the request. We may also deny your request if you ask us to amend information that:

Was not created by us, unless the person or entity that created it is no longer available to make the amendment

Is not part of the health information kept by or for Twelve Way Foundation providing Recovery Support Services

Is not part of the information you would be permitted to inspect or copy

Is accurate and complete.

### **Right to an Accounting of Disclosures**

You have the right to request an "accounting of disclosures." This is a list of some of the disclosures we made of health information about you that were not specifically authorized by you in advance with the exception of the following disclosures:

For treatment, payment (out-of-state patients), and operations

To persons involved in your care

For national security or intelligence purposes, or

To correctional institutions or law enforcement officials.

Your request must state a time period that may not be longer than six years, and it should indicate in what form you want the list (i.e., on paper or electronically). The first list you request within a 12-month period will be free. For additional lists, we may charge you for the costs of providing the list. We will notify you of the cost involved, and you may choose to withdraw or modify your request at that time before any costs are incurred.

### **Right to Request Restrictions**

You have the right to request a restriction or limitation on the health information we use or disclose about you for treatment, payment, or health care operations. You also have the right to request a limitation on the health information we disclose about you to someone who is involved in your care or the payment for your care, such as a family member or friend. We are not required to agree to your request. If we do agree, we will comply with your request unless the information is needed to provide you with emergency treatment.

To request restrictions, you must make your request in writing. In your request, you must tell us:

What information you want to limit

Whether you want to limit our use, disclosure, or both, and

To whom you want the limits to apply; for example, disclosures to your spouse.

### **Right to Request Restrictions to a Health Plan (Out-of-State Patients)**

You have the right to request a restriction on disclosures of your health information to a health plan (for purposes of payment or health care operations) in cases where you have paid out of pocket, in full, for items received or services rendered by Twelve Way Foundation providing Recovery Support Services.

### **Right to Confidential Communications**

You have the right to request to receive communications from us by using alternative means for receipt of information or by receiving the information at alternative locations. We must accommodate your request, if it is reasonable. Contact Twelve Way Foundation providing Recovery Support Services Privacy Officer if you require such confidential communications.

## **Right to a Paper Copy of This Privacy Policy**

You have the right to a paper copy of this notice even if you received a copy electronically. You may ask us to give you a copy of this notice at any time. To obtain a paper copy of this notice, request a copy from Twelve Way Foundation providing Recovery Support Services

### **Breach of Unsecured Information**

If a breach of unsecured health information affecting you occurs, Twelve Way Foundation providing Recovery Support Services is required to notify you of the breach in writing and to indicate any and all remedies and corrective actions taken to respond to the breach.

### **Changes to this Privacy Policy**

We reserve the right to change this Privacy Policy. We reserve the right to make the revised or changed notice effective for health information we already have about you as well as any information we receive in the future. We will post a copy of the current notice in the organization. The effective date of this notice will be published at the top of the first page.

### **Complaints**

If you believe your privacy rights have been violated, you should immediately contact the Twelve Way Foundation providing Recovery Support Services Privacy Officer, Byron Butts, at (903) 935-4115. We will not take action against you for filing a complaint.

### **Questions About This Privacy Policy**

If you have any questions about Twelve Way Foundation providing Recovery Support Services Privacy Practices, Twelve Way Foundation providing Recovery Support Services Privacy Officer, Byron Butts, at (903) 935-4115

Byron Butts, Executive Director  
Twelve Way Foundation Recovery Support  
Services  
3901 Elysian Fields Avenue  
Marshall, TX 75672

## **II. Website Terms and Conditions**

Please read these Website Terms and Conditions of use carefully before using this site. Twelve Way Foundation providing Recovery Support Services may revise these Website Terms and



Conditions from time to time. Your continued use of this website will mean you accept those changes.

### **This Site Does Not Provide Medical Advice**

All materials presented on this site are for informational purposes only. The content is not intended to be a substitute for professional medical advice, diagnosis, or treatment. Always seek the advice of your physician or other qualified health provider with any questions you may have regarding a medical condition. Never delay seeking professional treatment or advice because of anything you may have read on this site. If you think you may have a medical emergency, call your doctor or 911 immediately.

Twelve Way Foundation providing Recovery Support Services does not recommend or endorse any specific tests, physicians, products, procedures, opinions, or other information that may be mentioned on the site. Reliance on any information contained on the site is solely at your own risk.

### **Use of Content**

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### **Liability of Twelve Way Foundation providing Recovery Support Services**

The use of this site is at your own risk.

The site and its content are provided on an “as is” basis. Twelve Way Foundation providing Recovery Support Services, **ITS LICENSORS, AND ITS SUPPLIERS, TO THE FULLEST EXTENT PERMITTED BY LAW, DISCLAIM ALL WARRANTIES, EITHER EXPRESS OR IMPLIED, STATUTORY OR OTHERWISE, INCLUDING BUT NOT LIMITED TO THE IMPLIED WARRANTIES OF MERCHANTABILITY, NON-INFRINGEMENT OF THIRD PARTIES’ RIGHTS, AND FITNESS FOR PARTICULAR PURPOSE.** Without limiting the foregoing, Twelve Way Foundation providing Recovery Support Services, its licensors, and its suppliers make no representations or warranties about the accuracy, reliability,

completeness, currency, or timeliness of the materials, software, text, graphics, links, or communications provided on or through the use of this site.

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### **III. Website Privacy Policy**

Twelve Way Foundation providing Recovery Support Services gathers information from the people who use our site so that we can offer our users a better, more fulfilling experience. We gather this information in a manner that provides for protection of personal privacy, and with an eye towards maintaining the security of all gathered information. This document details how we go about collecting, maintaining, and storing your information.

#### **General Information Gathering**

##### **Web Server Logs**

We keep a running record of what pages are requested on our site. Our web server logs contain information about what pages are most popular and how many pages are viewed in a given time period.

##### **Search Engines**

We do not track search engine use. No records are kept of any searches you might perform on Twelve Way Foundation providing Recovery Support Services.

##### **Session Cookies**

The site saves a session identifier (a long, random string of letters and numbers) as a cookie on site users' computers. This session identifier uniquely identifies the user for the duration of each session and then expires. No identifying information can be tied to this identifier once the session has ended. This is known as a non-persistent or session cookie.

#### **Information Use**

Twelve Way Foundation providing Recovery Support Services uses the information we gather from you for several purposes:

We analyze what our viewers like and do not like about our current offerings in order to design better services.

Subscribers to our newsletter receive monthly email newsletters including information about new products and services from Twelve Way Foundation providing Recovery Support Services

### **Information Distribution**

Twelve Way Foundation providing Recovery Support Services will never willfully disclose individually identifiable information about its users to any third party without first receiving that individual's permission. The individually identifiable information that you provide (if any) will be used for Twelve Way Foundation providing Recovery Support Services purposes only.