

This notice is only for your information. You do not have to do anything with this information.

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.

Effective Date of This Notice: October 2, 2017

Information About Your Health is Confidential

The Department of Children's Services (DCS) is required by law to maintain the privacy of information about your health and your child's health. DCS is required to give you this notice which describes the rules of the privacy law that we must follow to keep information about your health and your child's health confidential. These rules are subject to change by the federal government, and our Department is obligated and committed to tell you about any important changes which may be made in the future. DCS reserves the right to change its privacy practices described in this notice and apply those changes to any health information DCS maintains. We will give you a copy of any revised privacy notice while you are receiving services from DCS. DCS is required to follow the Privacy Notice currently in effect. DCS is required to notify you if there is a breach of your unsecured health information. Everyone who works with our Department must agree to keep health information private. The people who work with us include, but are not limited to:

- Department of Children's Services (DCS) employees
- Foster Parents
- DCS contract providers and their employees
- TennCare and TennCare health plans
- The State of Tennessee
- The Federal government
- Companies that have contracts with the State of Tennessee or the Federal government
- Health care providers, like a doctor or therapist

How DCS Uses Information About Your Health or Your Child's Health

When you and your child begin receiving services from DCS, we obtain health information about you and your child in order to provide those services. DCS is involved in providing services such as Family Support Services or Family Crisis Intervention for children who are not in DCS custody. DCS is also involved in providing court-ordered probation and aftercare services. The health information that DCS obtains in providing these services may include things such as the need for counseling, therapy, or substance abuse treatment.

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When a child comes into DCS custody, the court will give DCS the authority to consent to any necessary and routine medical care for that child. DCS may need to consent to medical care for a child in custody because the parent or legal guardian is not available or is unwilling to consent to medical care for the child. DCS needs as much information as possible about the child's health to make sure the child gets proper health care. This would include such things as:

- Notes or records from the child's doctor, drugstore, hospital or other health care providers
- Lists of illnesses the child and family members now have or have had before
- Lists of the medicines the child takes now or has taken before
- Results from x-rays and lab tests

DCS Shares Information About You and Your Child Only as the Law Allows

DCS would share information about you or your child to:

- Make sure that you get the treatment you need;
- Pay health care providers;
- Check on our program to ensure you are receiving quality health care;
- Help if anyone's health or safety is in danger;
- Prove that your child is enrolled in TennCare with your child's doctors or other providers;
- Check how health programs are working. Your information may help us find insurance fraud;
- Report cases of abuse or neglect;
- Tell you about appointments and other health information. We may send you or your child reminders for your child's check-ups. We may also send you information about health services that may be available to you;
- Obey laws on workers' compensation.

DCS may share information about you and your child with:

- Your family, foster families, or others who are involved in your child's care;
- The Court when the law says we must or we are ordered to do so;
- Schools or school nurses so they can treat your child or watch for any signs and symptoms of an illness or condition your child may have;
- TennCare Consumer Advocates or attorneys who represent your child on a TennCare appeal or are trying to help your child access services;
- Law enforcement;
- Public health agencies to update records for births and deaths or to track diseases;
- A coroner, funeral home, or people dealing with organ transplants;
- Medical research organizations. They must keep information about you and your child private.
- DCS may share information for research if we take out the identifying information that tell who you and your child are;
- Government agencies involved in military and veteran's activities, national security activities or correctional institutions.

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DCS May Need Written Approval to Share Private Health Information

• When we need approval to share private health information, we must ask for it on a written authorization form. You can take back your approval at any time, but you must tell us in writing.

YOUR HEALTH INFORMATION RIGHTS

You have the right to:

- See and get copies of your health records. If you want a copy, you must ask for it in writing. We may charge a fee for the cost of copying and mailing. DCS has the right to refuse to disclose certain information. If we cannot give you the information you want, we will send you a letter that tells you why.
- Ask questions about how we share your health information or ask questions about the information in this notice.
- Complain about how we share your health information. Please refer to the section in this notice entitled,
- Contact DCS with Questions or Complaints Regarding Your Rights to Privacy.
- Ask us to change health information that is wrong. You must ask us in writing. You must give us a reason why we need to change it. We may not be able to agree to the change. If we cannot make the change, we will send you a letter that tells you why.
- Ask us for a list of who got your health information. The list will tell you who got your information. You must ask us in writing for a copy. The law says that we do <u>not</u> have to give you a list when:
 - We have your written authorization to give out your health information;
 - We use it to help you get health care;
 - We use it to help with payment for your care;
 - We use it to operate our programs.
- Ask us not to share certain information about your health. You must ask us in writing. You must tell us what information you do not want shared, and with whom you do not want us to share that information. There may be some cases when we cannot agree to your request. If we cannot agree to your request, we will send you a letter that tells you why.
- Take back your approval for us to share your health information. If we ask you to sign an authorization form, you can take it back at any time. You must do it in writing (to the appropriate DCS office or facility that is maintaining your records). This will not change any information that we have already shared.
- Ask us to contact you in a different way or at a different address. You must ask us in writing, and tell us why we need to change.
- Ask for another copy of this notice or copies of any new notices.

The Rights Listed Above Apply to the Following Persons

• Persons 18 years old or older and emancipated minors, regarding their own health information;

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- Persons 16 years old or older who have mental illness or serious emotional disturbance, regarding their own mental health information;
- Persons who have the legal authority to make health care decisions for another individual, regarding the health information of the individual. <u>Note</u>: The law defines this being someone's "personal representative". DCS will have to verify that you are authorized to be someone's personal representative. DCS may also decide to not treat you as the personal representative of someone with regard to their private health information, if we believe that you have abused, neglected, or subjected that person to domestic violence, that treating you as their personal representative could put that person in danger, and that it is not in the best interest of the person to treat you as their personal representative;
- Persons under the age of 18 in specific situations where they consent to treatment that does not require parental consent, or when the doctor has determined that the minor is mature enough to consent to treatment and the doctor does not require parental consent. In these situations, the minor has privacy rights about their own health information related to such treatment.

How to Contact DCS with Questions or Complaints Regarding Your Rights to Privacy

Do you have questions or a complaint about your right to privacy? You can send your question or complaint to one of the following offices below. Asking questions or making a complaint will not have any affect on the services that you or your child receives. Be sure to include in your letter the name, birth date and social security number of yourself, your child or the person you are representing and keep a copy for your records.

Send complaints or questions to: Customer Relations Unit Department of Children's Services 315 Deaderick St., UBS Tower, 7 th Floor Nashville, TN 37243-1290 Toll free telephone number: 1-800-861-1935 E-Mail: <u>DCS.Custsrv@tn.gov</u>	You may also send complaints to: Office for Civil Rights U.S. Department of Health and Human Service Atlanta Federal Center, Ste 3B70, 61 Forsyth Street, SW Atlanta, GA 30303-8909 Voice phone (404) 562-7886 FAX (404) 562-7881 TDD (404) 331-2867 For complaints filed by email send to: <u>OCRComplaint@hhs.gov</u>
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THIS NOTICE AND THE INFORMATION CONTAINED HEREIN DOES NOT APPLY TO THE RELEASE OF SEALED ADOPTION RECORDS, PURSUANT TO TENNESSEE CODE ANNOTATED, TITLE 36.

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Tennessee Department of Children's Services HIPAA Notice of Privacy Practices – Client Acknowledgement

The purpose of the *Notice of Privacy Practices* information that you have been given and asked to read is to inform you about the law protecting your health information and how the Department of Children's Services may use your health information.

This *Notice* describes your privacy rights regarding your health information and how you may exercise those rights. This *Notice* also gives you information about where to direct your questions or comments about the policies and procedures the Department of Children's Services uses to protect the confidentiality of your health information.

Please review this document carefully and ask for clarification if you do not understand any portion of it.

Client Acknowledgement

I have received the Department of Children's Services (DCS) *Notice of Privacy Practices*, which describes how DCS may use my health information, my rights to privacy regarding my health information, and how I can exercise those rights.

Signature - Client (or Personal Representative)

Date

<u>Note</u>: Department of Children's Services retains this <u>signed page</u>. The Client retains the Notice of Privacy Practices information attached.

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