YOUTH FOR CHANGE
NOTICE OF PRIVACY PRACTICES
Revised 5/26/2021

THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION.

PLEASE REVIEW IT CAREFULLY.

If you have any questions about this notice, please contact:
Youth for Change (YFC)
Privacy Officer
260 Cohasset Road
Chico, California 95926
(530) 877-8187

WHO WILL FOLLOW THIS NOTICE

This notice describes our agency’s practices and that of any health care professional authorized to enter information into your chart/file at any YFC facility/program, or at our contractors. This includes any intern, volunteer, or unlicensed person, who might help you while you are receiving services, all employees, staff and other personnel who work for this agency or those who contract with us. These individuals may share medical information about you with each other for purposes of treatment, payment or operations as described in this notice.

OUR PLEDGE REGARDING HEALTH INFORMATION.

We understand that health information about you is personal/private and we are committed to protecting your health information. We create a record of care and services you receive on behalf of this agency so we can provide you with quality care and to comply with certain legal requirements. This notice applies to all of the records of your care generated by this agency, its
providers, staff, and those who provide services to you on behalf of YFC. In addition, it applies to any records we may have received from your other providers. Other providers may have different policies or notices regarding their use and disclosure of health information created at their office or facilities.

This notice will tell you about the ways in which we may/disclose health information about you. We describe your rights and certain obligations we have regarding the use and disclosure of health information. We are required by law to make sure that health information identifying you is kept private, to give you notice of our legal duties and privacy practices with respect to this information about you, and to follow terms in the current notice.

**HOW WE MAY USE AND DISCLOSE HEALTH INFORMATION ABOUT YOU**

The following categories describe different ways that we use/disclose health information. Every use/disclosure for each category will have an example listed. All of the ways we are permitted to use and disclose information will fall within one of the categories.

**For Treatment**—We may use health information about you to provide you with medical treatment or services. The term “medical treatment” includes all behavioral healthcare and medical services that you might receive here or from our contractors (outpatient health services, inpatient health services). We may disclose health information about your mental or medical health care to other behavioral health care professionals at this agency or to physicians, nurses, clinicians, counselors, or other YFC personnel who are involved in administering services provided by YFC or our contractors. For example, we may share health information with a pharmacist who needs to dispense a prescription, or a physician assessing your physical health may need to know your physical disabilities that may prevent you from attending recommended services at another site. In addition, the doctor may need to inform the clinician or counselor if you have these disabilities to ensure adequate scheduling of services in the future. Another example might be a licensed clinician may ask a staff member to call the office of a psychiatrist to arrange for a medication assessment appointment for you. Your clinician might then discuss
with the psychiatrist concerns he/she has about you and why medication might be useful. Different programs at YFC may share health information about you in order to coordinate the different factors you need, such as medications, counseling, lab work or other services. We may disclose health information about you to people outside the agency who may be involved in your health care after you complete certain goals or programs, such as family members, clergy, or others we use to provide services that are part of your care.

**For Payment**-We may use and disclose health information about you so that the treatment and services you receive from YFC or our contractors may be billed, and payment may be collected from you, Medi-Cal, an insurance company, or a third party. For example, we may need to give your health plan information about treatment/services/counseling you received by YFC so your health plan will pay or reimburse you or us for the services. In addition, we may tell your health plan provider about a treatment you are going to receive, and to obtain prior approval or to determine whether your plan will cover the treatment.

**For Health Care Operations**-We may use/disclose health information about you for agency administration. These uses/disclosures are necessary to operate the agency and ensure that all of our clients receive quality care. For example, we may use health information to review our treatment/services to evaluate the performance of our staff in caring for you. We may combine health information about many YFC clients to decide what additional services the agency should offer, what services are not needed, and whether certain new programs/treatments are effective, or for staff to review for learning purposes. We may disclose information to psychiatrists, licensed clinical social workers, psychologists, clinicians, marriage family therapists (and MFT interns), physicians, vocational/registered nurses, individual contractors, students, interns or to other behavioral health care staff who are involved in taking care of you at this agency, or who work with this agency to provide care for its clients. Furthermore, we may disclose information for purposes of quality assurance and peer review. We may combine health information from other agencies to compare our effectiveness and where improvements can be made in the care/services we offer. We will remove information that identifies you from this set of health information so others may use it to study health care and health care delivery without learning who the specific clients are. We are required to deliver our charts to our contracted county
behavioral health partners for periodic quality reviews. We may use our charts in audits, fraud and abuse programs or planning and managing the Medi-Cal program.

**Appointment Reminders**-We may use/disclose health information to contact you as a reminder that you have an appointment or to change an appointment for programs or services with our agency or our contractors. If you are not at your contact phone number, we may leave this information on your answering machine or a message left with the individual answering the phone.

**Treatment Alternatives**-We may use and disclose health information to tell you about, or recommend possible programs or services that may be of interest to you.

**Health-Related Benefits and Services**-We may use/disclose health information to tell you about health-related benefits/services that may be of interest to you, i.e. food programs.

**Individuals Involved in Your Care or Payment for Your Care**-With your permission we may release limited health information about you to a friend/family member who is involved in your health care or who helps pay for your care. Example, if you ask a friend to pick up medication for you at the pharmacy, we may tell that person what the medication is and when it will be ready for pickup. Unless there is a specific written request from you to the contrary, we may also tell your family or friends your condition and that you are receiving services from our agency or contractor. In addition, we may disclose health information about you to an entity assisting in a disaster relief effort so that your family can be notified about your condition, status, and location.

**As Required By Law**-We will disclose health information about you when required by federal, state, or local law. Example, if we reasonable suspect child abuse, we are mandated by law to report. Or, information may be disclosed to the Department of Health and Human Services to ensure that your rights have not been violated.

**To Avert a 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.

For Appeals-You or your health care provider may appeal Medi-Cal decisions made about your health care services. Your health information may be used to decide these appeals.

Multi-disciplinary Teams-We may share information with professionals serving on “multi-disciplinary personnel” teams if the information is relevant to the prevention, identification management, or treatment of an abused youth and his/her parent(s).

Military and Veterans-If you are a member of the armed forces, we may release health information about you as required by military command authorities. We may release health information about foreign military personnel to the appropriate foreign military authority.

Worker’s Compensation-We may release medical information about you for worker’s compensation or similar programs. These programs provide benefits for work-related injuries/illness.

Public Health Risks-We may disclose health information about you for public health activities. These activities generally include the following: To prevent or control disease, injury or disability; to report births or deaths; to report the abuse or neglect of children, elders, and dependent adults; to report reactions to medications or problems with products; to notify a person who may have been exposed to a disease or may be at risk for contracting or spreading a disease or condition.

Health Oversight Activities-We may disclose information to a health oversight agency for activities authorized by law. For example; audits, investigations, inspections, and licensure. These activities are necessary for the government to monitor the health care system, government programs, and compliance with civil rights laws.