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**Privacy Statement**

**Notice to individuals receiving services** from Brunswick Interagency Program about how your medical information is protected, used and disclosed. Please review carefully.

All individual and family information provided during screening, admission and service is considered confidential. The disclosure of Protected Health Information (PHI) is governed by North Carolina General Statute 122C and the Health Insurance Portability and Accountability Act of 1966 (HIPPA), as well as any other applicable federal or state laws.

Exchange and use of PHI between BIP staff for the purpose of education and employment services will be permitted and based on ‘need to know” guidelines and positional authority.

Disclosure of PHI outside of Brunswick Interagency Program is permitted when your or your legal representative signs a written authorization, or when you give your verbal authorization in an emergency situation. Any authorization for disclosure may be revoked at any time, except to the extent that action has been taken in reliance on it.

You have the right to request restriction of the disclosure of your PHI, except when Brunswick Interagency Program is required to do so. Under the following specific conditions, disclosure of information outside Brunswick Interagency Program is permitted/required by law and professional ethics without your specific authorization:

* When there is a medical or psychiatric emergency involving the health/safety of others.
* When the BIP staff are required by law to report instances of neglect or abuse of a child or disabled adult.
* When the BIP is responding to a court order.
* When the BIP is required by North Carolina Administrative Code to disclose physician information due to an incident which would cause health risk to other persons.

You also have other rights related to the use and disclosure of PHI in your medical record. These include:

* Right to request your medical record be designated as a “secure” file
* Right to inspect and request a copy of your medical record.
* Right to request amendment of any section of your medical record.
* Right to receive an accounting of disclosures that have occurred with your medical record.

Each disclosure of PHI will be documented in the medical record. You have the right to request an accounting of these disclosures. The program may mail or email information to you regarding appointment reminders, schedules or other information about community services that might be of interest to you. If you are interested in receiving information from the program, please let me know.

BIP reserves the right to change this notice and to make the new notice effective for all PHI maintained in hard copy or electric format. Revisions to the NOTICE OF PRIVACY PRACTICES will be made available to the BIP office for distribution to all individuals receiving services and their families.

Brunswick Interagency Program recognizes the importance of confidentiality, and your right to be fully informed of all regulations regarding PHI. If you feel your privacy rights have been violated, you may contact the Secretary of The North Carolina Department of Health and Human Services (DHHS) at 20001 Mail Service Center, Raleigh, NC 27699-2001, or (919) 733.4534; or the United States Secretary of Health and Human Services at 200 Independence Ave. SW, Washington, DC 20201, or (877) 696.6755. Provision of services will not be affected y the filing of any complaint.

If you are interested in learning more about any of the rights identified in this document, please

contact: LeAnn Cecil, Director, BIP at 910-755-7381.

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