



AUBURN UNIVERSITY  
PSYCHOLOGICAL SERVICES CENTER

Address and Contact Information:

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**Auburn University Psychological Service Center (AUPSC) Privacy Notice**

*This privacy notice describes how mental health information about you may be used and disclosed and how you can get access to this information. **Please review it carefully.***

**Your Rights**

When it comes to your health information, you have certain rights. This section explains your rights and some of our responsibilities to help you.

Get an electronic or paper copy of your clinical record

- You can ask to see or get an electronic or paper copy of your medical record and other health information we have about you. Ask us how to do this.
- We will provide a copy or a summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee.
  - For example, the cost for additional assessment reports is \$20.

Ask us to correct your medical record

- You can ask us to correct health information 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 60 days.

Request confidential communications

- 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 say “yes” to all reasonable requests.



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Ask us to limit what we use or share

- You can ask us **not** to use or share certain health information for treatment, payment, or our operations.
  - We are not required to agree to your request, and we may say “no” if it would affect your care.

Get a copy of this privacy 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 health information.
- We will make sure the person has this authority and can act for you before we take any action.

File a complaint if you feel your rights are violated

- You can complain if you feel we have violated your rights by contacting us using the information on page 1.
- You can file a complaint with EthicsPoint ([EthicsPoint™ How to File a Report \(auburn.edu\)](#)), submitting an email to [privacy@auburn.edu](mailto:privacy@auburn.edu), or by contacting the Division of Institutional Compliance & Privacy directly ([Division of Institutional Compliance and Privacy \(auburn.edu\)](#))."
- We will not retaliate against you for filing a complaint.

Your Choices

**For certain health information, you can tell us your choices about what we share.** If you have a clear preference for how we share your information in the situations described below, talk to us. 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:
  - Share information with your family, close friends, or others involved in your care
  - Share information in a disaster relief situation
  - *If you are not able to tell us your preference, 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 and imminent threat to health or safety.*



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- In these cases we never share your information unless you give us written permission:
  - Marketing purposes
  - Most sharing of psychotherapy notes

### **Our Uses and Disclosures**

**How do we typically use or share your health information?** We typically use or share your health information in the following ways:

- Treat you:
  - We can use your health information and share it with other professionals who are treating you.
  - *Example: A doctor treating you for an injury asks another doctor about your overall health condition.*
- Run our organization:
  - We can use and share your health information to run our practice, improve your care, and contact you when necessary.
  - *Example: We use health information about you to manage your treatment and services.*
- Bill you for services
  - We can use and share your health information to bill you and get payment from grants covering the cost of specialty services.
  - *Example: We give information about you to our accountant to pay for select services with grant funding and/or contracts.*

**How else can we use or share your health information?** We may share your information in other ways – usually in ways that contribute to the public good, such as public health and research.

- Help with public health and safety issues
  - We can share health information about you for certain situations such as:
    - Reporting suspected abuse, neglect, or domestic violence
    - Preventing or reducing a serious threat to anyone’s health or safety
  - Do research:
    - We can share your information for health research with Institutional Review Board (IRB) consent
  - Comply with the law
    - We will share information about you if state or federal laws require it
  - Respond to lawsuits and legal actions
    - We can share health information about you in response to a court or administrative order, or in response to a subpoena



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**Our Responsibilities**

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing and with a signed obtain/release of information form. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

**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.

**Privacy Officer Information**

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