



The Center for Men's Excellence

Psychological Science with Proven Results

Notice of Privacy Practices

Effective April 14, 2003, this notice describes how personal health information about you may be used and disclosed and how you can get access to this information.

Our Pledge Regarding Your Personal Health Information

We are committed to protecting personal health information about you. We create a record of care for use in your evaluation and treatment. This notice tells you about the ways in which we may use or disclose this information about you. It also describes your rights and certain obligations we have regarding the use and disclosure of your medical information. We are required by law to make sure your personal health information is protected, to give you this notice describing our legal duties and privacy practices, and to follow the terms of the notice that is currently in effect.

How We May Use and Disclose Personal Health Information About You

For Treatment and Operations

We may use personal health information about you to provide treatment or services among staff.

For Payment

We may use and disclose personal health information about you so that evaluation and treatment may be billed to an insurance company or third party. We may also need to give information to an insurance company or third party for preauthorization or reauthorization to find out whether your plan will pay for services.

To Comply with Laws and Regulations

We may disclose personal health information about you to comply with state or federal laws. This may include, but not be limited to, laws regarding child and elderly abuse, anti-terrorism laws, and laws regarding complying with courts and regulatory boards.

To Avert Serious Threat to Health or Safety

We may disclose personal health information about you when necessary to prevent or lessen a serious and immediate threat to your health and safety, or the health and safety of another person. These situations may involve contacting significant others, hospital staff, crisis response personnel, or peace officers to avert threats.

By Requesting Your Authorization

We may disclose personal health information about you if you authorize use to do so. These situations may include, but not be limited to, conferring with other health care providers, legal counselors, or family members.

Your Rights Regarding Personal Health Information About You

Right to Inspect and Copy

With certain exceptions, you have a right to inspect and to receive a copy of your personal health information. If you are denied access to information in your record, you may ask us to prepare a summary of that information or to share that information with another licensed health care provider. We may charge you for summarizing and copying services.

Right to Request and Amendment or Addendum

If you feel that information about you in your record is incorrect or incomplete, you may ask us to amend the information or to make an addendum.

Right to Accounting of Disclosures

You have the right to request a list of disclosures we have made of your personal health information.

Right to Request Restrictions

You have the right to request a restriction or limitation on the medical information we may use or disclose. For example, you may request that we not discuss certain aspects of your record with a family member. You also have the right to limit or to revoke authorization that you previously granted. However, we are unable to take back any disclosures made with your permission.

Right to Request Confidential Communications

You have a right to request that we communicate with you in a certain way or location. For example, you may request that we call you at home, but not at work. Or you may request that we email you, but not send letters using paper mail.

Right to Paper Copy of This Notice

You have a right to a paper copy of this notice at any time.

Changes to Our Practices and This Notice

We reserve the right to change privacy practices and notice. We reserve the right to make the revised or changed notice effective for personal health information we already have about you as well as any information we receive in the future.

Questions or Complaints

If you have any questions about your privacy rights, please contact our Clinic Coordinator at 858-216-1686 or contact the Department of Health and Human Services at 866-627-7748