



Notice of Privacy Practices

Revised: 02/02/2026

Your Information. Your Rights. Our Responsibilities.

This notice applies to all treatment and services provided by The Neighborhood Center, Inc. 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.**

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 medical record

- You can ask to inspect 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.
- If we deny your request, you have the right to request a review of that denial. Contact the Privacy Officer.

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. Ask us to correct your medical record
- You can ask us to correct or amend health information about you that you believe 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. 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 (TPO). We are not required to agree to your request, and we may say “no” if it would affect your care.
- If you pay for a service or health care item out-of-pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer. We will say “yes” unless a law requires us to share that information. Get a list of those with whom we’ve shared information
- You can ask for an account (list) of the times we’ve shared your health information. The account will include when, why and with whom the information was shared. We’ll provide one accounting a year for free but may charge a reasonable, cost-based fee if you ask for another one within 12 months.

- SUD records: the account will include disclosures made up to three years prior to the date of the request except for those related to TPO (unless shared electronically).
- All other records: the account will include disclosures made up to six years prior to the date of the request except for those related to TPO and certain other disclosures (such as any you asked us to make).

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 file a complaint if you feel we have violated your rights by contacting:

The Neighborhood Center, Inc.

Corporate Compliance Officer

624 Elizabeth Street

Utica, New York 13501

By Phone: (315) 272-2657

Online www.neighborhoodctr.org/makeareport

- You can also file a complaint with:

NYS Office of Mental Health

Central New York Field Office

545 Cedar Street

Syracuse, New York 13210

By Phone: (315) 426-3930 **Fax** (315) 426-3950

Online <https://omh.ny.gov/omhweb/contact/>

New York State Office of Mental Health

Customer Relations

44 Holland Avenue

Albany, New York 12229

By Phone: 1-800-597-8481

Online <https://omh.ny.gov/omhweb/contact/>

The New York State Justice Center

161 Delaware Avenue

Delmar, New York 12054-1310

By Phone: (518) 549-0200

Online <https://www.justicecenter.ny.gov/reporting-incidentof People With Special Needs>

Office of Children and Family Services

Capital View Office Park

52 Washington Street

Rensselaer, NY 12144

By Phone: (518) 473-7793

Online [Phone Numbers and I https://ocfs.ny.gov/main/contact/](https://ocfs.ny.gov/main/contact/) [nformational Links | Contact Us | Office of Children and Family Services](#)

Email: info@ocfs.ny.gov

U.S. Department of Health and Human Services Office for Civil Rights

Mail a letter to:

Centralized Case Management Operations

U.S. Department of Health and Human Services

200 Independence Avenue, S.W.

Room 509F HHH Bldg.

Washington, D.C. 20201,

By Phone: 800-368-1019

TDD toll-free: (800) 537-7697

Online www.hhs.gov/ocr/privacy/hipaa/complaints/

email: OCRComplaint@hhs.gov

Office of Civil Rights

U.S. Department of Health and Human Services

Jacob Javits Federal Building

26 Federal Plaza Suite 3312

New York, NY 10278

Customer Response Center: (800) 368-1019

Fax: (202) 619-3818

TDD: (800) 537-7697

Email: OCRComplaint@hhs.gov

New York State Department of Health

Centralized Hospital Intake Program

Mailstop: CA/DCS

Empire State Plaza

Albany, NY 12237

By Phone: 1-800-804-5447

<https://apps.health.ny.gov/surveyd8/facility-complaint-form>

Office of Addiction Services and Supports - Patient Advocacy

Online OASAS Credentialing Portal:

<https://credentialing.oasas.ny.gov/complaint/file-complaint>

By Phone: 1-800-5535790

Email: patientadvocacy@oasas.ny.gov

- **The Neighborhood Center 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
- Contact you for fundraising efforts

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.*

In these cases we never share your information unless you give us written permission:

- Marketing purposes
- Sale of your information
- To disclose psychotherapy or SUD counseling notes

In the case of fundraising:

- We may contact you for fundraising efforts, but you can tell us not to contact you again.
- You can opt out at any time, even if you previously agree to fundraising communications.
- No SUD health information will be used for fundraising purposes unless you have first been given a clear and conspicuous opportunity to elect not to receive such communications.

Our Uses and Disclosures

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

Treatment

We can use your health information and share it with other professionals who are providing you with treatment or services or otherwise involved in your care. Example: Neighborhood Center staff may share your information to coordinate treatment and services that you need, such as medical tests, higher level of care, transportation, etc.

Obtain payment

We can use and share your health information to obtain prior approval and bill and obtain payment from health plans or other entities. Example: We give information about you to your health insurance plan so it will pay for your treatment and services.

Operating the organization

We can use and share your health information to conduct administrative operations, improve your care, and contact you when necessary. Example: We use health information about you to review your treatment and services and to evaluate the performance of our staff in serving you. You can provide one

consent to be utilized for all future uses or disclosures for TPO purposes. Records disclosed to a third party for the purposes of TPO may be further disclosed by that third party without your consent to the extent permitted by HIPAA.

How else can we use or share your health information? We are allowed or required to share your information in other ways – usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information see:

www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html.

Help with public health and safety issues

We can share health information about you for certain situations such as:

- Preventing disease
- Helping with product recalls
- Reporting adverse reactions to medications
- Reporting suspected abuse, neglect, or domestic violence
- Preventing or reducing a serious threat to anyone's health or safety*

Address workers' compensation, law enforcement, and other government requests

We can use or share health information about you

- For workers' compensation claims
- For law enforcement purposes under certain circumstances
- For special government functions such as military, national security, and presidential protective services
- With health oversight agencies for activities authorized by law, such as audits, surveys, inspections and investigations related to your receipt of healthcare at The Neighborhood Center.

Comply with the law:

We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law.

Do research

We can use or share your information for health research.

Respond to organ and tissue donation requests

We can share health information about you with cadaver, eye, tissue and organ procurement organizations.

Work with a medical examiner or funeral director

We can share health information with a coroner, medical examiner, or funeral director when an individual dies.

Correctional institutions

- We can use or share health information about you if you are an inmate and the information is necessary to provide you with treatment or services, to protect your health, or for the safety of the correctional programs.
- SUD health information will only be shared for the purposes of treatment.

Respond to lawsuits and legal actions

- SUD records
 - o Records, or testimony relaying the content of such records shall not be used or disclosed in any civil, administrative, criminal or legislative proceedings against you unless based on specific written consent or court order.
 - o Records shall only be used or disclosed based on a court order after notice and an opportunity to be heard is provided to you or the holder of the record, where required.
 - o A court order authorizing use or disclosure must be accompanied by a subpoena or other similar legal mandate compelling disclosure before the record is used or disclosed.
- All other records
 - o We can share information about you in response to a court or administrative order, or in response to a subpoena.

Our Responsibilities

- **We will not use or disclose your information other than as described above unless you tell us we can in writing (provide consent).** If you consent, you may change your mind at any time. Let us know in writing if you change your mind to prevent further use or disclosure of your information. *Example: With consent authorizing such disclosure, we will share information about your treatment with a family member for the purpose of improving care.*
- We are required by law to maintain the privacy and security of your protected health information and to provide you with notice of our legal duties and privacy practices.
- We must abide by the terms of the notice currently in effect and give you a copy of it.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.

For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html.

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 (www.neighborhoodctr.org/compliance).

Discuss your rights, request access to your clinical information, or file a complaint. Assistance can be obtained by contacting The Neighborhood Center through the contact information listed on Page 2 of this Notice. Record requests must be submitted in writing.

*** Substance Use Disorder records.** SUD records are subject to additional use and disclosure restrictions found in 42 CFR Part 2.

HIV/AIDS information. HIV/AIDS information is subject to additional use and disclosure restrictions found in New York State Public Health Law Article 27-F.

Education Records. Federally protected education records are subject to additional use and disclosure restrictions found in the Family Educational Rights and Privacy Act (FERPA).