

OUR MISSION

God's love in Jesus Christ empowers Lutheran Family and Children's Services of Missouri to help families, children, and individuals experience greater hope and wholeness of life.

OUR COMMITMENT

Our commitment is to serve families and children throughout the State of Missouri in a quality manner. To this end, we ask ourselves the critical questions:

- Are we effective in getting results?"
- What are the challenges we face?"
- How can we do better?"

These questions help guide our activities and improve on the systems that support our day-to-day operations.

The approach of LFCS to service delivery is strength based and collaborative, promoting respect and positive behavior in a safe and secure environment. We assess potential clients for appropriateness of service and may refer to other resources to best meet the needs of the client.

If you have any questions about this notice or concerns regarding our privacy practices, please contact:

Privacy Officer • St. Louis Office

9666 Olive Boulevard, Suite 400
St. Louis, MO 63132
314-787-5100 • 1-866-326-5327

Mid-Missouri

307 Locust Street
Columbia, MO 65201
573-815-9955

St. Charles

100 Piper Hill Drive
St. Peters, MO 63376
636-949-5522

Southeast Missouri

3178 Blattner Drive
Cape Girardeau, MO 63703
573-334-5866

Southwest Missouri

2130 N. Glenstone Avenue
Springfield, MO 65803
417-862-1972

Hilltop Child Development Center

6155 West Florissant Avenue
St. Louis, MO 63136
314-389-1001

Franklin County

15 South Oak
Union, Missouri 63084
636-234-0893



314-787-5100 or 1-866-326-LFCS (5327)

If interested in learning more about our services, volunteering, or making a donation to LFCS, call or visit our website

www.lfcsmo.org

PRIVACY PRACTICES



Notice of Privacy Practices

Revision Date: June 2014



NOTICE OF PRIVACY PRACTICES

This policy is developed in compliance with the Health Insurance Portability and Accountability Act of 1996 (45 CFR) (HIPAA). If you are a client of Lutheran Family and Children's Services of Missouri, this notice describes how your health information may be used and disclosed, and how you can get access to this information. Please review this notice carefully. A full copy of this notice is available upon request.

I. Understanding Your Health Information

As a client of Lutheran Family and Children's Services of Missouri (LFCS), or other health care providers, a record is kept of your visit. This record, typically referred to as a case record, contains your reason for seeking services, symptoms, diagnosis, and plan of treatment for future services. Although the case record is the property of LFCS, the information within the record belongs to you. This information is considered your "Protected Health Information" (PHI) and is afforded certain protections under the law.

II. How We Can Use Your Health Information:

- Service
- Payment
- Duty to Warn
- Public Health
- Private Support
- Emergencies
- Health Care Operations
- Charges Against the Agency
- Requirements by law
- Other with notification

LFCS will release only the minimum amount of information necessary to address the purpose of the use or disclosure. In any other situation, LFCS will request your written authorization before using or disclosing any of your identifiable health information. If you choose to sign such an authorization to disclose information, you can revoke that authorization at any time to stop future uses/disclosures.

III. Your Rights Regarding Your Health Information

You have the following rights with respect to your protected health information:

- request in writing that your protected health information not be used or disclosed by LFCS for treatment, payment or administration purposes or to persons involved in your care except when specifically authorized by you. The agency will consider your request, but we are not legally bound to agree to the restriction. To the extent that we do agree to any restrictions, we will put the agreement in writing and abide by it except in emergency situations. We cannot agree to limit uses/disclosures that are required by law.
- request that we contact or send you information at an alternative address or by an alternative means. We will agree to your request as long as it is reasonably easy for us to do so.
- inspect and copy your protected health information. Any such requests must be made in writing. The agency will respond in writing to such a request within 30 days. If you request copies, LFCS may charge you a reasonable cost for copying.
- submit a request to amend your information if you believe that information in your record is incorrect or if important information is missing.
- an accounting of disclosures of your protected health information.

You have a right to receive this Notice in paper and/or electronic format.

IV. The Agency's Duties

LFCS is required by law to maintain the privacy of protected health information and to provide individuals with notice of its legal duties and privacy practices with respect to protected health information.

LFCS is required to abide by the terms of this Notice currently in effect, and LFCS reserves the right to change the terms of this Notice and to make the new Notice provisions effective for all protected health information that it maintains. Should the agency make changes in its Notice, it will post the changed Notice in its office waiting areas and on our website. You may request a copy of the Notice at any time.

V. Complaint Procedure

If you are concerned that LFCS may have violated your privacy rights, or you disagree with a decision LFCS made about access to your records, you may contact the person listed below. You may also send a written complaint to the Secretary of the Department of Health and Human Services. The person listed below can provide you with the appropriate address upon request. Under no circumstances will any actions be taken against you for filing a complaint.

Privacy Officer
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St. Louis, MO 63132
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