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Burlington, VT 05401
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DISCLOSURE OF INFORMATION

In this packet is the following information:

- a. Professional qualifications and experiences for Kathleen M. Keating, APRN-PMH, BC, Psychiatric Nurse Practitioner
- b. A list of actions that constitute unprofessional conduct according to Vermont statutes
- c. The methods for making a consumer inquiry or filing a complaint with the Office of Professional Regulations
- d. The prescription policy for Kathleen Keating, Kathleen M. Keating, APRN-PMH, BC, Psychiatric Nurse Practitioner
- e. Notice of Mental Health Policies and Practices to Protect the Privacy of Your Health Information

My signature acknowledges that I have received all materials listed above, and that any questions that have regarding this information have been asked and answered by my therapist.

Client Signature

Date

Parent or Guardian Signature (if applicable)

Date

Witness Signature

Date



149 Cherry Street ■ Burlington, VT 05401 ■ 802 863 2495 phone ■ 802 865 0534 fax

**Kathleen M. Keating, APRN-PMH, BC
Psychiatric Nurse Practitioner**

Education

M.S.N. University of Vermont Burlington, VT 2012

Professional Licensure

Advanced Practice Registered Nurse
State of Vermont #101.0089676

Board Certification

American Nurse Credentialing Center
Family Psychiatric-Mental Health Nurse Practitioner

Professional Affiliation

American Psychiatric Nurses Association
Vermont Nurse Practitioners Association
Sigma Theta Tau Honor Society of Nursing: Kappa Tau Chapter

Specialties

Psychiatric Medication Evaluations, Prescribing, and Monitoring
Adults aged 18 and up
Brief Short Term Individual Therapy



Unprofessional Conduct Standards for Advanced Practice Registered Nurses
Regulated under the Vermont Secretary of State

1615. Regulatory authority; unprofessional conduct

(a) The board (OPR, Board of Nursing) may deny an application for licensure or renewal or may revoke, suspend, or otherwise discipline an advanced practice registered nurse upon due notice and opportunity for hearing in compliance with the provisions of 3 V.S.A. chapter 25 if the person engages in the conduct set forth in 3 V.S.A. § 129a or section 1582 (both included below) of this title or any of the following:

(1) Abandonment of a patient in violation of the duty to maintain a provider-patient relationship within the reasonable expectations of continuing care or referral.

(2) Solicitation of professional patronage by agents or persons or profiting from the acts of those representing themselves to be agents of the licensed APRN.

(3) Division of fees or agreeing to split or divide the fees received for professional services for any person for bringing or referring a patient.

(4) Practice beyond those acts and situations that are within the practice guidelines approved by the board for an APRN and within the limits of the knowledge and experience of the APRN, and, for an APRN who is practicing under a collaborative agreement, practice beyond those acts and situations that are within both the usual scope of the collaborating provider's practice and the terms of the collaborative agreement.

(5) For an APRN who acts as the collaborating provider for an APRN who is practicing under a collaboration agreement, allowing the mentored APRN to perform a medical act which is outside the usual scope of the mentor's own practice or which the mentored APRN is not qualified to perform by training or experience or which is not consistent with the requirements of this chapter and the rules of the board.

(6) Providing, prescribing, dispensing, or furnishing medical services or prescription medication or prescription-only devices to a person in response to any communication transmitted or received by computer or other electronic means when the licensee fails to take the following actions to establish and maintain a proper provider-patient relationship:

(A) a reasonable effort to verify that the person requesting medication is in fact the patient and is in fact who the person claims to be;

(B) establishment of documented diagnosis through the use of accepted medical practices; and

(C) maintenance of a current medical record.

(7) prescribing, selling, administering, distributing, ordering, or dispensing any drug legally classified as a controlled substance for his or her own use or for an immediate family member.

(8) Signing a blank or undated prescription form.

(b)(1) For the purposes of subdivision (a)(6) of this section, an electronic, online, or telephonic evaluation by questionnaire is inadequate for the initial evaluation of the patient.

(2) The following would not be in violation of subdivision (a)(6) of this section:

(A) initial admission orders for newly hospitalized patients;

(B) prescribing for a patient of another provider for whom the prescriber has taken call;

(C) prescribing for a patient examined by a licensed APRN, physician assistant, or other practitioner authorized by law and supported by the APRN;

(D) continuing medication on a short-term basis for a new patient prior to the patient's first appointment; or

(E) emergency situations where the life or health of the patient is in imminent danger. (Added 2011, No. 66, § 5, eff. June 1, 2011.)

§ 129a. Unprofessional conduct

(a) In addition to any other provision of law, the following conduct by a licensee constitutes unprofessional conduct. When that conduct is by an applicant or person who later becomes an applicant, it may constitute grounds for denial of a license or other disciplinary action. Any one of the following items, or any combination of items, whether or not the conduct at issue was committed within or outside the state, shall constitute unprofessional conduct:

(1) Fraudulent or deceptive procurement or use of a license.

(2) Advertising that is intended or has a tendency to deceive.

(3) Failing to comply with provisions of federal or state statutes or rules governing the practice of the profession.

(4) Failing to comply with an order of the board or violating any term or condition of a license restricted by the board.

(5) Practicing the profession when medically or psychologically unfit to do so.

(6) Delegating professional responsibilities to a person whom the licensed professional knows, or has reason to know, is not qualified by training, experience, education, or licensing credentials to perform them, or knowingly providing professional supervision or serving as a preceptor to a person who has not been licensed or registered as required by the laws of that person's profession.

(7) Willfully making or filing false reports or records in the practice of the profession; willfully impeding or obstructing the proper making or filing of reports or records or willfully failing to file the proper reports or records.

(8) Failing to make available promptly to a person using professional health care services, that person's representative, or succeeding health care professionals or institutions, upon written request and direction of the person using professional health care services, copies of that person's records in the possession or under the control of the licensed practitioner, or failing to notify patients or clients how to obtain their records when a practice closes.

(9) Failing to retain client records for a period of seven years, unless laws specific to the profession allow for a shorter retention period. When other laws or agency rules require retention for a longer period of time, the longer retention period shall apply.

(10) Conviction of a crime related to the practice of the profession or conviction of a felony, whether or not related to the practice of the profession.

(11) Failing to report to the office a conviction of any felony or any offense related to the practice of the profession in a Vermont district court, a Vermont superior court, a federal court, or a court outside Vermont within 30 days.

(12) Exercising undue influence on or taking improper advantage of a person using professional services, or promoting the sale of services or goods in a manner which exploits a person for the financial gain of the practitioner or a third party.

(13) Performing treatments or providing services which the licensee is not qualified to perform or which are beyond the scope of the licensee's education, training, capabilities, experience, or scope of practice.

(14) Failing to report to the office within 30 days a change of name or address.

(15) Failing to exercise independent professional judgment in the performance of licensed activities when that judgment is necessary to avoid action repugnant to the obligations of the profession.

(b) Failure to practice competently by reason of any cause on a single occasion or on multiple occasions may constitute unprofessional conduct, whether actual injury to a client, patient, or customer has occurred. Failure to practice competently includes:

(1) performance of unsafe or unacceptable patient or client care; or

(2) failure to conform to the essential standards of acceptable and prevailing practice.

(c) The burden of proof in a disciplinary action shall be on the state to show by a preponderance of the evidence that the person has engaged in unprofessional conduct.

(d) After hearing, and upon a finding of unprofessional conduct, a board or an administrative law officer may take disciplinary action against a licensee or applicant, including imposing an administrative penalty not to exceed \$1,000.00 for each unprofessional conduct violation. Any money received under this subsection shall be deposited in the professional regulatory fee fund established in section 124 of this title for the purpose of providing education and training for board members and advisor appointees. The director shall detail in the annual report receipts and expenses from money received under this subsection.

(e) In the case where a standard of unprofessional conduct as set forth in this section conflicts with a standard set forth in a specific board's statute or rule, the standard that is most protective of the public shall govern. (Added 1997, No. 40, § 5; amended 2001, No. 151 (Adj. Sess.), § 2, eff. June 27, 2002; 2003, No. 60, § 2; 2005, No. 27, § 5; 2005, No. 148 (Adj. Sess.), § 4; 2009, No. 35, § 2; 2011, No. 66, § 3, eff. June 1, 2011; 2011, No. 116 (Adj. Sess.), § 5.)

§ 1582. Regulatory authority; unprofessional conduct

(a) The board may deny an application for registration, licensure, or relicensure; revoke or suspend any license to practice nursing issued by it; or discipline or in other ways condition the practice of a registrant or licensee upon due notice and opportunity for hearing in compliance with the provisions of 3 V.S.A. chapter 25 if the person engages in the following conduct or the conduct set forth in 3 V.S.A. § 129a:

(1) Has made or caused to be made a false, fraudulent, or forged statement or representation in procuring or attempting to procure registration or renew a license to practice nursing;

(2) Whether or not committed in this state, has been convicted of a crime related to the practice of nursing or a felony which evinces an unfitness to practice nursing;

(3) Is unable to practice nursing competently by reason of any cause;

(4) Has willfully or repeatedly violated any of the provisions of this chapter;

(5) Is habitually intemperate or is addicted to the use of habit-forming drugs;

(6) Has a mental, emotional, or physical disability, the nature of which interferes with ability to practice nursing competently;

(7) Engages in conduct of a character likely to deceive, defraud, or harm the public;

(8) Has willfully omitted to file or record or has willfully impeded or obstructed a filing or recording or has induced another person to omit to file or record medical reports required by law;

(9) Has knowingly aided or abetted a health care provider who is not legally practicing within the state in the provision of health care services;

(10) Has permitted his or her name or license to be used by a person, group, or corporation when not actually in charge of or responsible for the treatment given;

(11) Has failed to comply with the patient bill of rights provisions of 18 V.S.A. § 1852; or

(12) Has committed any sexual misconduct that exploits the provider-patient relationship, including sexual contact with a patient, surrogates, or key third parties.

(b) Procedure. The board shall establish a discipline process based on this chapter and the Administrative Procedure Act.

(c) Appeals. Any person or institution aggrieved by any action of the board under this section or section 1581 of this title may appeal as provided in 3 V.S.A. § 130a.

(d) A person shall not be liable in a civil action for damages resulting from the good faith reporting of information to the board about incompetent, unprofessional, or unlawful conduct of a nurse. (Added 1979, No. 192 (Adj. Sess.), § 1; amended 1993, No. 201 (Adj. Sess.), § 1; 1997, No. 145 (Adj. Sess.), § 39; 2011, No. 66, § 5, eff. June 1, 2011.)

Inquiries or Reporting to the Vermont Secretary of State Office of Professional Regulation

The Office of Professional Regulation, commonly known as "OPR," is a division of the Secretary of State's Office responsible for supporting the boards and advisory groups overseeing licensure for 45 different professions and about 58,000 licensees, ranging from Architects to Tattooists. The mission of OPR is public protection from incompetent or unethical practitioners through a system of licensure.

When professions are regulated, competency is assured. OPR accomplishes this through licensing boards and advisors by ensuring that applicants are qualified, complaints of unprofessional conduct are investigated and prosecuted, and standards of practice are well defined. This further safeguards the public who may lack a basis for judging what constitutes acceptable quality in service or conduct.

Each profession or occupation is governed by laws defining professional conduct. Consumers who have inquiries or wish to obtain a form to register a complaint about unprofessional conduct of an Advanced Practice Registered Nurse may do so by:

- calling the:OPR, Board of Nursing at: **802-828-1505**
- or visiting the website: http://vtprofessionals.org/conduct/All_Professions_Complaint_Form.pdf
- or by writing the Secretary of State at 128 State Street, Montpelier, Vermont 05633-1101

Although hearings and disciplinary actions are public, the investigative process is entirely confidential. If the decision is to pursue disciplinary action against the respondent, however, the names of the persons involved may become public. If the decision is to close the investigation without disciplinary action, the complaint and information collected will remain confidential.

Complaint investigations focus on licensure and fitness of the licensee to practice. Disciplinary action, when warranted, ranges from warning to revocation of license, based on the violations and circumstances. From this process, a complainant should not expect a return of fees paid or additional unpaid services as a result. If you seek restitution of this nature, consider consulting with the Consumer Protection Division of the Office of the Attorney General, seeing an attorney, or filing a case in Small Claims court.



**Kathleen Keating, APRN-BC
Psychiatric Mental Health Nurse Practitioner
Prescription Policy (Revised 5.22.2018)**

Frequency of Medication Management Visits

Typically I expect to see clients every one to three months for medication management once we have established a stable regimen. Frequency will be adjusted for certain circumstances, including clients on controlled drugs, periods of client instability, or when we are changing or adjusting medications. Between appointments I do expect clients to call me **before** making any adjustments to medications or to dosages of the medications that I prescribe.

Clients on controlled medications (e.g. stimulants, benzodiazepines, certain sleep medications) will generally be seen at least monthly. This applies even when there are no changes in medications and may include random pill counts and/or laboratory monitoring. If the client is on a controlled medication from another provider, I will also expect to see the client monthly. The risk of abuse, side effects and drug interactions with these medications require more frequent monitoring.

Prescription Renewal between Appointments

In most cases prescriptions will be electronically prescribed and renewed during appointments. Prescriptions with refills (noted on your prescription bottle) can be refilled by calling the pharmacy or its refill line. If you run out of a prescription and refills in between appointments, please call the pharmacy first to see if you have a new prescription (renewal) for the medication on file. I ask this because I often e-prescribe ongoing medication renewals during appointments, anticipating when your prescription and refills are due to run out.

Renewals are considered new prescriptions by pharmacies so you cannot get information about them from an automated refill line. Once you confirm that you have no refills and there are no renewals, then call my direct voicemail at 1-866-271-9804 with your refill request. (See 'Information needed for a Prescription Renewal' in the box on the next page).

Prescriptions will be renewed within 24-48 hours of clients' calls. I will make an effort to provide them on shorter notice, but it is not always possible. I only return calls about medication requests if I have a question about them. I ask that you contact your pharmacy if you want to be sure they have received the renewal request and/or if your prescription is ready.

Do not hesitate to contact me if your prescription is not available at your pharmacy by 48 hours from your request, or if you have an urgent matter that needs my attention. In the case of a mental health emergency, please call 911, First Call at 1-802-488-7777 or go to the nearest Emergency Room.

Information Needed for a Prescription Renewal

1. Your name
2. Date of birth
3. The name of the medication
4. The dose
5. How often you take it
6. The pharmacy name and location
7. A number where I can reach you if I have questions.

Special Rules for Stimulant Prescriptions (e.g. Adderall, Vyvanse, Ritalin, Concerta, etc.)

These are Schedule II drugs according to the US Drug Enforcement Agency. This means they can be dangerous and they have high potential for abuse that can result in psychological or physical dependence. Pharmacies can only fill prescriptions for stimulants when it is 48 hours or less before the previous prescription is due to run out. Occasional exceptions for out-of-state vacations may be requested of the pharmacy and for insurance coverage to allow for an earlier fill. Please contact me **at least** a week in advance if you need an early vacation stimulant fill. Out-of-state pharmacies may not accept a controlled drug prescription from a Vermont-licensed health care professional.

Stimulants can only be prescribed in thirty-day quantities with no refills. In a few select cases, I will write an additional one-month prescription with a note to the pharmacy to delay filling it until 48 hours before the previous prescription is due to run out. This will be solely at my discretion. Occasionally a client must miss a visit for illness or other unavoidable reasons and cannot reschedule before the medication needs to be renewed. Again, at my discretion, I will prescribe the stimulant to cover this situation. Prescription renewal requests will not be honored if appointments are habitually missed.

An on-call psychiatric practitioner covering for my practice is not expected to prescribe stimulants in my absence. Therefore, it is especially important that clients manage their appointments to obtain stimulant prescriptions in a timely manner to avoid running out of medication.

Lost or Damaged Controlled Medications (e.g. stimulants, benzodiazepines, certain sleep medications)

Lost or damaged controlled drugs may be replaced once during the course of a client's treatment by me. Vermont law requires replacement prescriptions to be labeled "replacement script." Also, Vermont prescribers are required to participate in the online Vermont Prescription Monitoring Program for tracking prescriptions of controlled drugs filled by pharmacies in Vermont and a number of other states. I routinely monitor this database.

Thank you for your attention to this policy. If you have any questions or suggestions about it, please bring them up at an appointment or call me at 1-866-271-9804.

Kathy Keating

Notice of Privacy Practices

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.

WHO WILL FOLLOW THIS NOTICE

This notice describes our practices and that of:

- Any health care professional authorized to enter information into your health record.
- All divisions and programs of Networks, Inc.
- Any volunteer we allow to help you while you are receiving services from Networks, Inc.
- All employees, staff and other personnel.
- All Networks, Inc. entities, sites and locations follow the terms of this notice. Staff members at these entities, sites and locations may share health information with each other for treatment, payment or operations purposes as described in this notice.

OUR PLEDGE REGARDING HEALTH INFORMATION

We understand that health information about you and your health is personal. We are committed to protecting your privacy and health information about you. We create a record of the care and services you receive at Networks, Inc. We need this record to provide you with quality care and to comply with certain legal requirements. This notice applies to all of the records of your care generated by Networks, Inc, whether made by Networks, Inc. personnel or your personal doctor. Your personal doctor may have different policies or notices regarding the doctor's use and disclosure of your health information created in the doctor's office or clinic.

This notice will tell you about the ways in which we may use and disclose health information about you. We also describe your rights and certain obligations we have regarding the use and disclosure of health information.

We are required by law to:

- Make sure that health information that identifies you is kept private;
- Give you this notice of our legal duties and privacy practices with respect to health information about you; and
- Follow the terms of the notice that is currently in effect.

HOW WE MAY USE AND DISCLOSE HEALTH INFORMATION ABOUT YOU

The following categories describe different ways that we use and disclose health information. For each category of uses or disclosures we will explain what we mean and try to give some examples. Not every use or disclosure in a category will be listed.

- **For Treatment.** We may use health information about you to provide you with treatment or services. We may disclose information about you to doctors, nurses, clinicians, case managers, interns, or other Networks, Inc. personnel who are involved in providing services to you. For example, a clinician might be treating you for a mental health problem and need to talk with our psychiatrist or another clinician who has specialized training in a particular area of care. We may also disclose information about you to people outside our organization who are involved in your health care.
- **For Payment.** We may use and disclose health information about you so that the treatment and services you receive at Networks, Inc. may be approved by, billed to, and payment collected from a third party such as an insurance company. For example, we may need to give your health plan information about counseling you received at Networks, Inc. so your health plan will pay us or reimburse you for a counseling session. We may also need to disclose your treatment plan in order to obtain prior approval or to determine whether your plan will cover the service/treatment.
- **For Health Care Operations.** We may use and disclose health information about you for our internal operations. These uses and disclosures are necessary to run Networks, Inc. and make sure that all individuals receiving services from us receive quality care. For example, we may use health information to review our treatment and services and to evaluate the performance of our staff in serving you. We may also disclose information to doctors, nurses, clinicians, case managers, interns for review and learning purposes.

Appointment Reminders. We may use and disclose information to contact you as a reminder that you have an appointment.

- **Alternative Treatment and Benefits and Services.** We may use and disclose information about you in order to obtain and recommend to you other treatment options and available services as well as other health-related benefits or services.
- **Research.** Under certain circumstances, we may use and disclose health information about you for research purposes. For example, a research project may involve comparing the health and recovery of all consumers who received one medication to those who received another, for the same condition. All research projects, however, are subject to a special approval process. This process evaluates a proposed research project and its use of health information, trying to balance the research needs with consumer's need for privacy of their health information. Before we use or disclose health information for research, the project will have been approved through this research approval process, but we may, however, disclose health information about you to people preparing to conduct a research project, for example, to help them look for consumers with specific health needs, so long as the health information they review does not leave

Networks, Inc. We will always ask for your specific permission if the researcher will have access to your name, address or other information that reveals who you are, or will be involved in your care at Networks, Inc.

- **As Required by Law.** We will disclose medical information about you when required to do so by federal, state or local law. In Vermont, this would include: victims of child abuse; the abuse, neglect or exploitation of vulnerable adults; or where a child under the age of sixteen is a victim of a crime; and firearm-related injuries.
- **To Avert a Serious Threat to Health or Safety.** We may use and disclose health information about you when necessary to prevent a serious threat to your health and safety or the health and safety of the public or another person. Any disclosure, however, would only be to someone able to help prevent the threat.

SPECIAL SITUATIONS

- **Military and Veterans.** If you are a member of the armed forces, we may release health information about you as required by military command authorities.
- **Workers' Compensation.** We may release health information about you as authorized for workers' compensation or similar programs as authorized by Vermont law. These programs provide benefits for work-related injuries or illnesses.
- **Public Health Risks.** We may disclose health information about you for public health activities. These activities generally include the following:
 - To prevent or control disease, injury or disability;
 - To report deaths;
 - To report child abuse or neglect;
 - To report abuse, neglect or exploitation of vulnerable adults; any suspicion of abuse, neglect, or exploitation of the elderly (age 60 or older), or a disabled adult with a diagnosed physical or mental impairment, must be reported;
 - To report reactions to medications or problems with products;
 - To notify individuals of recalls of products they may be using;
 - To notify an individual who may have been exposed to a disease or may be at risk for contracting or spreading a disease or condition
- **Health Oversight Activities.** We may disclose health information to a health oversight agency for activities authorized by law. These oversight activities include, but are not limited to, audits, investigations, inspections, and licensure. These activities are necessary for the government to monitor the health care system, government programs, and compliance with civil rights laws.
- **Legal Proceedings and Disputes.** If you are involved in a lawsuit or a dispute, we may disclose health information about you in response to a court or administrative order.
- **Public Health Officials and Funeral Home Directors.** We may release information to a coroner or medical examiner. This may be necessary, for example, to identify a deceased person or determine the cause of death. We may also release health information to funeral directors thereby permitting them to carry out their duties.
- **Individuals in Custody.** If you are an inmate of a correctional institution or under the custody of a law enforcement official, we may release health information about you to the correctional institution or law enforcement official. This release would be necessary (1) for the institution to provide you with health care; (2) to protect your health and safety or the health and safety of others; or (3) for the safety and security of the correctional institution.

OTHER USES OF HEALTH INFORMATION

Other uses and disclosures of health information not covered by this notice or the laws that apply to us will be made only with your written permission. If you provide us permission to use or disclose health information about you, you may revoke that permission, in writing, at any time. If you revoke your permission, we will no longer use or disclose health information about you for the reasons covered by your written authorization. You understand that we are unable to take back any disclosures we have already made with your permission, and that we are required to retain our records of the services that we provided to you.

YOUR RIGHTS REGARDING INFORMATION ABOUT YOU.

Any assistance (physical, communicative, etc.) you need in order to exercise your rights will be provided to you by Networks, Inc.

You have the following rights regarding information we maintain about you:

- **Right to Review and Copy.** You have the right to review and copy health information that may be used to make decisions about your care. This may include both health and billing records.
To review and copy health information that may be used to make decisions about you, you must submit your request in writing to Networks, Inc. If you request a copy of the information, we may charge a fee for the costs of copying, mailing, or other supplies associated with your request.
We may deny or limit access to your request to inspect and copy in certain very limited circumstances. If you are denied or limited access to health information, you may request that the decision be reviewed. Another health care professional chosen by Networks, Inc. will review your request and the denial. The person conducting the review will not be the person who denied your request. We will comply with the outcome of the review.
- **Right to Amend.** If you feel that health information we have about you is incorrect or incomplete, you may ask us to amend the information. You have the right to request an amendment for as long as the information is kept by Networks, Inc.

To request an amendment, your request must be made in writing and submitted to the author or health information department. In addition, you must provide a reason that supports your request. We may deny your request for an amendment if it is not in writing or does not include a reason to support that request. In addition, we may deny your request if you ask us to amend information that:

- Was not created by us, unless the person or entity that created the information is no longer available to make the amendment;
 - Is not part of the designated record set kept by Networks, Inc.
 - Is not part of the information which you would be permitted to inspect and copy; or,
 - Was determined accurate or complete by Networks, Inc.
- **Right to an Accounting of Disclosures.** You have the right to request an “accounting of disclosures.” This is a list of the disclosures we made of health information about you.

To request this list or accounting of disclosures, you must submit your request in writing to *Networks, Inc.* Your request must state a time period, which may not be longer than six years and may not include dates before April 14, 2003. Your request should indicate in what form you want the list (for example, on paper, electronically). The first list you request within a 12-month period will be free. For additional lists, we may charge you for the costs of providing the list. We will notify you for the cost involved and you may choose to withdraw or modify your request at that time before any costs are incurred.

- **Right to Request Restrictions.** You have the right to request a restriction or limitation on the health information we use or disclose about you for treatment, payment or health care operations. You also have the right to request a limit on the health information we disclose about you to someone who is involved in your care or the payment for your care, like a family member. For example, you could ask that we not use or disclose information about a counseling session you received.

We are not required to agree to your request. If we do agree, we will comply with your request unless the information is needed to provide you emergency treatment.

To request restrictions, you must make your request in writing to Networks, Inc.

In your request, you must tell us (1) what information you want to limit; (2) whether you want to limit our use, disclosure or both; and (3) to whom you want the limits to apply, for example, disclosures to your spouse.

- **Right to Request Confidential Communications.** You have the right to request that we communicate with you about health matters in a certain way or at a certain location. For example, you can ask that we only contact you at work or by mail.

To request confidential communications, you must make your request in writing to Networks, Inc. We will not ask you the reason for your request. We will accommodate all reasonable requests. Your request must specify how or where you wish to be contacted.

Right to a Paper Copy of This Notice. You have the right to a paper copy of this notice. You may ask us to give you a copy of the current notice at any time.

To obtain a paper copy of this notice, contact Networks, Inc.

Security of Health Information.

Due to the nature of community based human service practices, Networks, Inc. representatives may possess individually identifiable information beyond the physical security of Networks, Inc. In these cases, Networks, Inc. representatives will ensure the security and confidentiality of the information in a manner that meets Networks, Inc. policy, State and Federal Law.

CHANGES TO THIS NOTICE

We reserve the right to change this notice. We reserve the right to make the revised or changed notice effective for health information we already have about you as well as any information we receive in the future. We will post a copy of the current notice in our facility. The notice will contain on each page, in the top right-hand corner, the effective date. In addition, should we make a material change to this notice, we will, prior to the change taking effect, publish an announcement of the change.

COMPLAINTS

If you believe your privacy rights have been violated, you may file a complaint with Networks, Inc. or with the Secretary of the Department of Health and Human Services. To file a complaint with Networks, Inc., contact: Networks, Inc. at 802 863-2495.

All complaints must be submitted in writing. Complaint forms are available at each location including the reception area at Networks, Inc.'s office. You will not be penalized for filing a complaint.

The Secretary of the Department of Health and Human Services can be contacted through their regional office at Office of Civil Rights, U.S. Department of Health and Human Services, Government Center, J.F. Kennedy Federal Building – Room 1875, Boston, Massachusetts 02203, voice phone (617) 565-1340, fax (617) 565-3809, TDD (617) 565-1343.