

## **NOTICE OF PRIVACY PRACTICES**

**EFFECTIVE FEBRUARY 16, 2026**

This notice describes:

- How health information about you may be used and disclosed
- Your rights with respect to your health information
- How to access your health information
- How to file a complaint concerning a violation of the privacy or security of your health information, or of your rights concerning your information

You have a right to a copy of this notice (in paper or electronic form) and to discuss it with the Service Integrity Team at (209) 468-8785 or [compliance@sjcbhs.org](mailto:compliance@sjcbhs.org) if you have any questions. SJCBS is required by law to maintain the privacy of your health information and to abide by the terms of this notice.

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### ***YOUR RIGHTS***

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When it comes to your behavioral health records, you have certain rights.

#### **Get a copy of your records**

You may request to see or get a copy of your records. We will provide a copy or summary, in a format you request if readily producible, usually within 15 business days, and may charge a reasonable, cost-based fee.

In some situations, we may deny your request. If we do, we will provide a written explanation. You may have the right to ask for a review of the denial as allowed by law.

#### **Ask us to amend your health records**

If you think something is wrong or incomplete, you can request a correction. We may deny your request, but we will explain our reason in writing within 60 days.

#### **Request confidential communication**

You may ask that we contact you at a specific address or phone number. We will approve all reasonable requests.

#### **Limit what we use or share**

We are not required to agree to all requests, but:

- If you pay for a service in full and ask us not to share it with your health plan, we must agree unless required by law.

#### **Get a list of who we shared information**

You can request a list or accounting of the times we've shared your health information.

We will include all the disclosures except those about treatment, payment, and health care operations for the past six years.

If you receive substance use disorder (SUD) services, you can request an accounting of SUD disclosures made through our electronic health record within the past three years.

You may receive one free accounting every 12 months. Additional reports may include a fee.

**Get a copy of this Notice**

You can request a paper copy at any time, just ask any staff member.

**Choose someone to act for you**

A person with medical power of attorney or legal guardianship may act for you.

**File a complaint**

You can file a complaint with San Joaquin County Behavioral Health Services (SJCBS) or the U.S. Department of Health & Human Services. We will not retaliate against you.

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***YOUR CHOICES***

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You can tell us your preferences on how we share information.

You decide if we:

- Share information with family or support persons
- Communicate for appointment reminders or program-related outreach
- Participate in disaster response communications

If you cannot express your preference (for example, if you are unconscious), we may share information if we believe it is necessary to prevent a serious threat.

We will not share your information without written permission for:

- Marketing
- Selling your information
- HIV test results (unless allowed by law)

**You may change your mind at any time by submitting a written request to your provider. If you change your mind, it will apply to future uses and disclosures but not to any uses or disclosure that we may have already made with your authorization.**

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***HOW WE USE AND SHARE INFORMATION***

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**Treat you:** We share information with your providers for your care.

**Organizational operations:** We use your information to manage programs, evaluate services, train staff, and maintain records.

**Bill for your services:** We use your information to coordinate benefits and obtain payment.

**We will never share psychotherapy or process notes without your specific written authorization or in limited circumstances if required by law.**

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***ADDITIONAL USES AND DISCLOSURES***

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Your information may be shared in other ways – usually to contribute to public safety or comply with law. We follow strict rules before doing so.

We may share information to:

- Prevent disease
- Report abuse or neglect
- Respond to court orders
- Respond to serious threats
- Support government oversight
- Assist medical examiners and organ donation
- Support military and national security operations
- Work with law enforcement (with legal authority)
- Process Workers' Compensation claims

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### ***SPECIAL LAWS THAT APPLY TO BEHAVIORAL HEALTH SERVICES***

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Certain information receives extra protection under California and federal law.

#### **MENTAL HEALTH INFORMATION (WIC § 5328)**

We will only disclose your mental health information as permitted by Welfare & Institutions Code §5328, such as:

- To providers involved in your care
- For mandatory abuse or neglect reporting
- When required to prevent harm
- When ordered by a court
- For specific oversight functions

#### **SUBSTANCE USE DISORDER INFORMATION (42 CFR PART 2)**

Your SUD information has enhanced protections. We cannot share it without:

Your written consent

OR

A Part 2-compliant exception, such as:

- Medical emergencies
- Program audits or evaluations
- Scientific research
- Qualified Service Organizations
- Court orders that meet strict Part 2 standards

You can choose to sign a single consent for all future uses of your information for treatment, billing, or operational purposes.

SUD information cannot be used to investigate or prosecute you. Redisclosure must comply with member consent, Health Insurance Portability and Accountability Act (HIPAA) and Part 2 regulations.

#### **HIV/AIDS INFORMATION (H&S CODE §§ 120975–121022)**

We will not disclose HIV/AIDS test results or related information without your written authorization, except:

- To providers for diagnosis, treatment, or care
- For required public health reporting
- For quality review
- For billing or payment
- When required by law

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**OUR RESPONSIBILITIES**

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SJCBHS is committed to protecting your personal and private medical and other treatment information, also known as “protected health information” or “PHI”.

By law, we must:

- Maintain the privacy and security of our records
- Notify you if a breach occurs
- Follow the duties described in this Notice
- Not use or share information unless allowed or authorized

We will not use or share your information other than described here unless you tell us we can in writing.

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**CHANGES TO THIS NOTICE**

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We may change this Notice at any time. The new Notice will apply to all records we maintain and will be available in our offices and on our website. You can request a paper copy from your provider or any SJCBHS staff.

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**HOW TO FILE A COMPLAINT**

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If you believe your privacy rights have been violated, you may submit a complaint with us or directly with the Federal Government. You will not be penalized for filing a complaint.

| Entity  | Contact Information  |
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| San Joaquin County Health Care Services – Service Integrity Team                      | Alicia Tacata, Compliance and Service Integrity Manager<br>1212 North California Street<br>Stockton, CA 95202<br>Phone: (209) 561-8719<br>Email: <a href="mailto:compliance@sjcbhs.org">compliance@sjcbhs.org</a>  |
| California Department of Health Care Services   | Attention: Privacy Officer<br>Department of Health Care Services<br>C/O Office of Legal Services<br>P.O. Box 997413, MS0010<br>Sacramento, CA 95899-7413   |
| Secretary of the U.S. Department of Health and Human Services, Office of Civil Rights | Attention: Regional Manager<br>50 United Nations Plaza, Room 322<br>San Francisco, CA 94102<br>Phone: (800) 368-1019<br>TTY: (866) 788-4989<br>Voice: (866) 627-7748<br>Email: <a href="mailto:OCRComplaint@hhs.gov">OCRComplaint@hhs.gov</a><br>Online: <a href="#">HIPAA Complaint Process   HHS.gov</a> |

**For additional information, contact the Service Integrity Team at (209) 468-8785.**