

NOTICE OF PRIVACY PRACTICES

This notice describes how medical information about you may get used and disclosed, and how you can get access to this information. Please review it carefully.

Responsibilities of Central Florida Behavioral Health Network (CFBHN)

CFBHN is required by law to maintain the privacy and security of your health information. The medical information maintained by our network is known as protected health information (PHI). It is collected from the mental health and substance use providers from which you have received services.

CFBHN does not directly provide clinical treatment services. CFBHN serves as a managing entity and maintains protected health information received from contracted behavioral health providers for authorized administrative, oversight, quality improvement, care coordination, and payment purposes.

Our organization must follow the duties and privacy practices described in this notice and will make a copy of this notice available to you. CFBHN will not use or share your information other than as described here unless you give us permission in writing. You will be notified without reasonable delay, and no later than the time required by applicable law, if a breach of your protected health information occurs.

Uses and Disclosures

CFBHN receives, maintains, uses, and discloses protected health information, including substance use disorder records to perform health care operations. This includes network management, quality improvement, care coordination, payment to the agencies that treat you, contract oversight, and other authorized functions on behalf of the behavioral health system of care. CFBHN may use information about you to help develop and improve the types of services and care offered within CFBHN's network. CFBHN is also allowed or required to share your information in other ways without your written authorization:

- To help with public health and safety issues, including reports of abuse, neglect, or domestic violence or preventing/reducing a serious threat to anyone's health or safety.
- In response to lawsuits and legal actions.
- For research, audit, or evaluation.
- In compliance with state or federal law.

CFBHN will never sell your information or use it for marketing purposes.

Special Protections for Substance Use Disorder Records

Some of the protected health information maintained by CFBHN may include records that are subject to federal confidentiality protections for substance use disorder patient records under 42 CFR Part 2.

CFBHN may use and disclose substance use disorder records as permitted or required by applicable federal and state law. CFBHN will not use or disclose substance use disorder information in a manner that unlawfully discriminates against you in admission to, access to, or treatment for health care; employment; housing; access to courts; access to social services and benefits; or other activities protected by federal law.

Substance use disorder records disclosed with a valid patient consent for treatment, payment, and health care operations may be redisclosed as permitted by applicable federal law. However, such records may not be used or disclosed in legal proceedings against you except as authorized by law.

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(continued)

Federal law prohibits the use or disclosure of substance use disorder records, or testimony describing the contents of those records, in any civil, criminal, administrative, or legislative proceeding against the individual who is the subject of the record unless the individual provides written consent or the disclosure is authorized by a court order and otherwise permitted by applicable law.

Your Rights

When it comes to your health information, you have the right to:

- Receive a paper or electronic copy of this notice.
- Request to inspect or obtain a paper or electronic copy of the health information that we maintain about you. With some exceptions, CFBHN reserves the right to deny your request, but you may make an appeal.
- You may ask CFBHN not to use or share certain protected health information and/or request restrictions on certain uses and disclosures of your substance use disorder records. We are not required to agree to every request but will comply when required by law.
- Request confidential communications, including to be contacted in a specific way or to send mail to a different address. You may request that an electronic copy of your protected health information be transmitted to another person or entity designated by you when permitted by law.
- 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. CFBHN will make sure the person has this authority and can act for you before we take any action.
- Revoke a written authorization for the release of your health information.
- Request an amendment of medical records maintained by the organization that provided your treatment. If you believe information maintained by CFBHN is inaccurate or incomplete, and the information originated with a treating provider, CFBHN may direct you to that provider for review and action.
- Receive an accounting of certain disclosures of your protected health information made by CFBHN during the six years prior to your request, subject to applicable exceptions.
- Receive an accounting of certain disclosures of your substance use disorder records made by CFBHN consistent with federal law.
- File a complaint if you feel your rights have been violated and/or if you believe your mental health or substance use disorder records have been improperly used or disclosed. To file a complaint, you may contact the following organizations. Filing a complaint will not affect your services, benefits, or eligibility, and CFBHN will not retaliate against you for exercising your rights.

POLICIES & PROCEDURES

Central Florida Behavioral Health Network, Inc.

Stephanie Johns
Privacy Officer
719 US Highway 301 S.
Tampa, FL 33619
(813) 740-4811
sjohns@cfbhn.org

Department of Children and Families
Office of Civil Rights
HIPAA Privacy Officer
2415 North Monroe Street, Suite 400
Tallahassee, FL 32303-4190
(850) 487-1901

State of Florida

HIPAA Privacy & Security Compliance Office
Agency for Health Care Administration
2727 Mahan Drive
Mail Stop #4
Tallahassee, FL 32308-5403
(850) 412-3960
Fax: (850) 414-6837
hipaaco@ahca.myflorida.com

U.S. Department of Health and Human Services (HHS)

Office for Civil Rights
200 Independence Avenue, S.W.
Washington, D.C. 20201
1-877-696-6775

You may also file a complaint using the portal on the US Department of Health and Human Services Office of Civil Rights website.
www.hhs.gov/ocr/privacy/hipaa/complaints

Changes to the Terms of this Notice

CFBHN 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, on our website, and we will mail a copy to you.

Effective Date of this Notice

This notice is effective as of August 11, 2026.

Notice of Privacy Practices

Approval:


Alan Davidson, President/Chief Executive Officer

Date Issued: 03/10/2010

Last Revision: 08/20/2026

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