

## Patient Handbook



### **Our Mission...**

*UCFS Healthcare strives to eliminate health disparities and improve the health and well-being of the community.*

### **Our Vision...**

*UCFS Healthcare, by performance, reputation, and partnership, will be Eastern CT's best choice for patient-centered health care.*

[UCFShealthcare.org](http://UCFShealthcare.org)



# United Community & Family Services

## Patient Handbook

### Locations Where You Can Get Care

#### The Edward and Mary Lord Family Health Center

47 Town Street  
Norwich, CT 06360  
(860) 892-7042



*\*Adult Primary Care, Pediatric Medicine, Gynecology, Behavioral Health Services & Dental*

#### Office Hours:

##### Pediatric & Adult Primary Care

Monday, Thursday – 8 am – 7 pm  
Tuesday, Wednesday – 8 am – 9 pm  
Friday - 8 am – 5pm  
1<sup>st</sup> & 3<sup>rd</sup> Saturday of each month – 9 am – 1 pm

##### Women's Health

Monday - Friday – 8 am – 5 pm

##### Dental

Monday - Thursday – 8 am – 7 pm  
Friday - 8 am – 5 pm  
1<sup>st</sup> & 3<sup>rd</sup> Saturday of each month – 9 am – 1 pm

##### Behavioral Health Services

Monday -Thursday: 8 am -7 pm  
Friday - 8 am- 5 pm

#### New London Behavioral Health Office

351 North Frontage Road, Suite 24  
New London, CT 06230  
(860) 442-4319

*\*Behavioral Health Services, Primary Care*

#### Office Hours:

##### Primary Care

Tuesday & Wednesday – 8 am – 4 pm  
Thursday – 11 am – 7 pm

##### Behavioral Health Services

Monday - Thursday - 8 am – 7 pm  
Friday - 8 am - 5pm

#### Plainfield Health Center

120-122 Plainfield Road  
Moosup, CT 06354  
(860) 822-4938



*\*Adult Primary Care, Pediatric Medicine & Behavioral Health Services*

#### Office Hours:

Pediatric & Adult Primary Care  
Monday, Tuesday & Friday – 8 am – 5 pm  
Wednesday & Thursday – 8 am – 7 pm

#### Plainfield Health Center

##### Behavioral Health Services

Monday & Friday - 8 am – 5 pm  
Tuesday & Wednesday - 8 am - 7 pm  
Thursday – 7 am – 6 pm

#### Griswold Health Center

226 East Main Street  
Griswold, CT 06351  
(860) 376-7040



*\*Adult Primary Care, Pediatric Medicine & Behavioral Health Services*

#### Office Hours:

##### Pediatric & Adult Primary Care

Monday & Friday - 8 am – 5 pm  
Tuesday - Thursday – 8 am – 7 pm  
2<sup>nd</sup> & 4<sup>th</sup> Saturday of each month – 9 am – 1pm

##### Behavioral Health Services

Monday - Thursday- 8 am – 7 pm  
Friday – 8 am - 5 pm  
2<sup>nd</sup> & 4<sup>th</sup> Saturday of each month – 9 am – 1pm

#### Colchester Behavioral Health Office

212 Upton Rd. Suite C  
Colchester, CT 06415  
(860) 537-7676

*\*Behavioral Health Services*

#### Office Hours:

##### Behavioral Health Services

Monday, Tuesday, Thursday– 8:30 am – 7 pm  
Wednesday – 8 am – 7 pm  
Friday – 8 am - 5pm

*Free parking is available in all locations.  
Norwich and Griswold locations are on the bus line.  
Wheelchair accessibility.*

#### Note:

*\*Services offered in specific health center  
UCFS now has electronic health records in all locations. You may be able to be seen at another location if the site you generally attend is not open.*

## Locations Where You Can Get Care

### School Based Health Center at Montville High School

800 Old Colchester Road

Oakdale, CT 06353

(860) 822-2803

*\*Pediatric Medicine & Behavioral Health Services*

#### Office Hours:

Pediatric Health Services

Tuesday & Thursday – 7:30 am – 2:30 pm

Behavioral Health Services

Monday- Friday – 7:30 am – 2:30 pm

*(Hours follow the school calendar)*

### School Based Health Center at Tyl Middle School

166 Chesterfield Road

Oakdale, CT 06353

(860) 822-2803

*\*Behavioral Health Services*

#### Office Hours:

Behavioral Health Services

Monday- Friday – 7:30 am – 3 pm

*(Hours follow the school calendar)*

### School Based Health Center at Norwich Technical High School

7 Mahan Drive

Norwich, CT 06360

(860) 822-2803

*\*Pediatric Medicine & Behavioral Health Services*

#### Office Hours:

Pediatric Health Services

Tuesday & Thursday – 7:30 am – 2:30 pm

Behavioral Health Services

Monday, Wednesday, Friday – 7 am – 2 pm

*(Hours follow the school calendar)*

### School Based Health Center at Norwich Free Academy

305 Broadway

Norwich, CT 06360

(860) 4822-280325-5557

*\*Pediatric Medicine & Behavioral Health Services*

#### Office Hours:

Pediatric Health Services

Monday -Friday – 7:30 am – 2:30 pm

Behavioral Health Services

Monday - Friday – 7 am – 2 pm

*(Hours follow the school calendar)*

### School Based Health Center at Kelly STEAM Magnet Middle School

25 Mahan Drive

Norwich, CT 06360

(860) 822-2803

*\* Pediatric Medicine & Behavioral Health Services*

#### Office Hours:

Pediatric Health Services

Monday, Wednesday, Friday – 8 am – 3 pm

Behavioral Health Services

Monday-Friday - 8 am - 3 pm

*(Hours follow the school calendar)*

### School Based Health Center at Global Studies

Magnet Middle School at Teachers Memorial

15 Teachers Dr.

Norwich, CT 06360

(860) 822-2803

*\* Pediatric Medicine & Behavioral Health Services*

#### Office Hours:

Pediatric Health Services

Monday, Wednesday, Friday – 8 am – 3 pm

Behavioral Health Services

Monday - Friday – 8 am - 3 pm

*(Hours follow the school calendar)*

### School Based Health Center at Stanton

Elementary School

386 New London Turnpike

Norwich, CT 06360

(860) 822-2803

*\* Pediatric Medicine & Behavioral Health Services*

#### Office Hours:

Pediatric Health Services

Tuesday and Thursday – 8:30 am – 3:30 pm

Behavioral Health Services

Monday - Friday – 8:30 am - 3:30 pm

*(Hours follow the school calendar)*

### School Based Health Center at Waterford High School

20 Rope Ferry Road

Waterford, CT 06385

(860) 822-2803

*\*Pediatric Medicine & Behavioral Health Services*

#### Office Hours:

Pediatric Health Services

Monday, Friday – 7:30 am – 10:30 am

Behavioral Health Services

Monday - Friday – 7:30 am – 2:30 pm

*(Hours follow the school calendar)*

### School Based Health Center at Clark Lane Middle School

105 Clark Lane

Waterford, CT 06385

(860) 822-2803

*\*Pediatric Medicine & Behavioral Health Services*

#### Office Hours:

Pediatric Health Services

Monday, Friday – 11 am – 2 pm

Wednesday – 8 am – 2 pm

Behavioral Health Services

Monday - Friday – 8 am – 3 pm

*(Hours follow the school calendar)*

**How to Make an Appointment:**

Call the health center/office you wish to be seen at to schedule an initial appointment or to schedule a follow up appointment. You will be asked to indicate if you have a preferred provider. You can also visit MyChart on our website, [www.ucfs.org](http://www.ucfs.org) to submit requests to have a customer service representative contact you to schedule an appointment, or to reschedule/cancel existing appointments. Please let us know if you have a hearing, visual or physical impairment or if you need an interpreter so we can accommodate your needs.

**Same Day Appointments**

We offer same-day medical appointments, plus walk-in care for urgent dental examinations and treatment. Whenever possible, we suggest that you call ahead to make an appointment. Medical services offer evening hour appointments on select nights in each location that offers medical care. We recommend being seen by your primary care provider but you may be able to be seen at another site based on your need. Between the hours of 8 a.m. – 4:30 p.m., Monday through Friday nurses are available to advise you regarding medical concerns.

**After-Hours Telephone Care**

If you are experiencing a medical emergency, please call 911. If possible, go the emergency room at the hospital nearest you.

For all other health concerns, call the health center number and you will be connected to the health center's answering service who will forward all calls and concerns to the provider on-call. You will be asked to provide your name, telephone number and a description of your medical, dental or behavioral health concern. All calls will be returned within 30 minutes.

**Canceling an Appointment**

We understand that sometimes it is not possible to keep an appointment. We have a 24-hour cancellation policy and ask that you please let us know if you need to cancel your appointment at least 24 hours in advance of your scheduled appointment, or as soon as possible. This can be done by calling the office where you receive care or by visiting MyChart at [mychart.ochin.org](http://mychart.ochin.org).

**Transportation**

As a client or parent/guardian of a client of UCFS you are responsible for transportation arrangements to and from the clinic. All programs are located and staffed to address the ease of access for clients seeking services. Our offices are located to provide easy access to individuals near public transportation and convenient to other community facilities.

**Arriving for an Appointment**

Please arrive 15 minutes before your scheduled appointment to allow time for check-in and registration. If this is your first visit, please arrive 30 minutes before your scheduled appointment to allow time to complete new patient paperwork (You may also visit MyChart to download registration paperwork ahead of time). For every visit, please bring your insurance card and a list of your current medications.

**What to Bring to the First Visit**

- Insurance card
- Documentation of income (2 pay stubs) for participation in the Sliding Fee Scale (discounted fee based on income)
- Complete medical history and records from previous physician, including specialists
- A list of current prescription medications, including immunizations and allergies
- If you are a legal guardian for a minor, please bring proof of guardianship.

We will make copies of all of the above the first time you visit, and keep them on file; however, to ensure we have the most updated information, we do request to review and update your personal information at each visit and complete registration paperwork once a year. We also require you to submit documentation of income once a year to re-establish your Sliding Fee Scale.

**Procedure for Medical Emergency While on Site**

In the event an emergency medical situation requiring emergency treatment arises while the client is on site, staff will call 911 for emergency personnel to respond. Staff member notifies their direct Supervisor and completes the Incident Report.

**Payment**

Patients are requested to have their co-pay available at the time of services rendered. The co-pay amounts are located on the patient's insurance card. We accept check, Visa, Mastercard and cash.

**Insurance Information:**

UCFS accepts most insurance plans. UCFS staff obtains health insurance authorization and re-authorizations as needed. Our staff can also provide assistance with applying for Supplemental Nutrition Assistance Program (SNAP) and pharmacy assistance programs. Staff assistance is also available for people interested in applying for Medicaid, HUSKY or Healthy Start.

UCFS provides services regardless of a person's ability to pay, with or without insurance.

UCFS can assist you in meeting your financial obligation in the following ways:

**Access to Care Program**

- You may be eligible for free or low-cost medical insurance based on your household income.
- Our Access to Care Specialist can help you:
  - Find out if you are eligible for HUSKY, Medicaid, or a qualified health plan on Access Health CT
  - Complete the application process
  - Apply for free or reduced cost medications
  - Learn about other programs and services in the community

Please call (860) 822-4798 or email [accesstocare@ucfs.org](mailto:accesstocare@ucfs.org) to schedule an appointment with an Access to Care Specialist.

**Sliding Fee Scale**

UCFS offers a sliding fee program for clients whose income is at or below 200% of the federal poverty level (FPL). UCFS' sliding fee scale is based upon a client's family size and household income. Clients who do not provide income information are responsible for services at UCFS' standard rate. Please call (860) 822-4367 or email [billing@ucfs.org](mailto:billing@ucfs.org) to schedule an appointment.

**Payment Arrangement for Current and Future Visits**

The Payment Arrangement will allow you to make weekly, biweekly or monthly payments for the total costs for services incurred during that month. Please call (860) 822-4367 or email [billing@ucfs.org](mailto:billing@ucfs.org) to schedule a consultation.

**Payment Plan for Outstanding Balances**

The Payment Plan will allow you to make weekly, biweekly or monthly payments on your account until the entire outstanding balance is paid. The payment amount and number of payments will be decided during your financial consultation with the UCFS Patient Financial Counselor. Please call (860) 822-4367 or email [billing@ucfs.org](mailto:billing@ucfs.org) to schedule a consultation.

**Medical Prescription Refills**

For medical prescription refills, you must first contact your pharmacy. Please allow 48 hours for your request to be processed. For further assistance with a refill request, you can call the office where you receive care.

**Note:** If you are a Behavioral Health Services patient and need a refill for a controlled substance, please call (860) 892-7042, press #2 for BHS, then #3 for the BHS Medline and leave a message. All messages are returned within 48 hours.

### **Policy Regarding Treatment for Chronic Pain For all New Patients**

Treating chronic pain can be challenging and it may take several types or combinations of treatments before you find relief. Your good health is our first concern and our health care professional will work together with you as a team to determine the best medical treatment plans for you.

This may be different from your previous care provider and will not include: opiates, except in rare cases, such as cancer. Opiates include: Vicodin, Percocet, Oxycontin and Morphine as well as other medications.

### **Referrals**

Many insurance plans, especially managed care plans require referrals for a test or an appointment with a specialist. Referrals must be obtained for any services other than those rendered directly by your primary care provider. You will need to initiate these referrals as soon as possible after an appointment is made for a test or with a specialist.

Each insured person must choose a primary care physician who provides access to all other healthcare needs of the insured through referrals. Without referrals, the insurance will not pay for the visit and the cost may become your responsibility.

Normal procedure for ensuring that the referral process is easier for you is as follows:

- Read your insurance plan and become familiar with it.
- Consult your primary care physician when you have any medical problems in order to acquire referrals to specialists or tests.
- Allow at least 48 hours for the referral to be completed.
- Once the referral is completed, it will be faxed, telephoned or mailed to the physician, institution or other provider for action.

### **CT Immunization Information System**

As required by law and to protect your health, your doctor will share immunization information (i.e., “shots” or “vaccines”) with the State of Connecticut Department of Public Health (DPH). DPH will store your shots in its immunization system called CT WiZ. CT WiZ helps make sure you get the shots needed to protect you against vaccine preventable diseases. If your shot record is lost or not available, DPH can share it with you and your doctor. You can choose to exclude your shot information from CT WiZ by sending a signed written request to the DPH Immunization Program. Immunization systems help prevent and control disease. All information is kept confidential as required by law.

## UCFS: The Patient Centered Medical Home



*United Community & Family Service is a Patient Centered Medical Home (PCMH) Group Practice*

We put you in the center of your health care. The PCMH model of care creates care teams that help you understand all of the services that you will receive, or may need in the future - even if the services are not being provided in our primary care office.

You, your family and our health center staff work as a team to ensure that you get the right care at the right time. At UCFS, our health care teams partner with you and your family and make every effort to understand and respect your unique needs, culture, values, and preferences.

We want you to be an active member of your care team. Our staff will ask you if you have a preferred provider. Our goal is to schedule your appointments with that preference in mind. We will support you in learning to manage and organize your own care. Recognizing that you and your family are core members of the care team, we will work hard to provide you with comprehensive and coordinated care that is based on evidence based practice standards.

*Here are a few ways we offer support:*

- Pediatric weekend urgent care services so you do not have to visit the emergency room when your child is sick. Always call your UCFS pediatrician first.
- On MyChart you can reschedule/cancel existing appointments, view lab results (Primary Care only) and submit updated personal information or simply ask a question.
- Evening hour appointments, same day appointments and round the clock telephone support
- Walk in urgent dental access at Norwich Health Center
- Assistance with referrals
- Patient appointment reminders
- Language line support for different languages
- Contacting you after inpatient or emergency room stay to see if you need a follow up appointment.
- When notified by the local hospital that you have been admitted, providing the hospital with a summary of your care.
- Providing specialists with a summary of care when we make a referral.

### **MyChart**

Our online Patient Portal allows you to perform the following tasks from any location with Internet access:

\*You must receive an email invitation to register for the patient portal. Please ask a member of our team for more information.

- Get direct access to health information
- Request and manage appointments
- View lab results
- Exchange secure messages with your provider
- Download intake paperwork
- View your records from any internet enabled device
- Update demographic information
- Pay bills



## **HEALTHY LIFESTYLE RESOURCES**

### **Smoking Cessation**



CT Quitline: 1-800-QUIT NOW,

[www.quitnow.net/connecticut](http://www.quitnow.net/connecticut)

Backus Hospital Freedom from Smoking Group

860-889-8331 - \$50 fee that is refunded if all sessions are attended

Day Kimball Quit Smoking Education Classes:

860-928-6541 x2083 or 2015

Ledge Light Health District, New London

Commit to Quit: 860-448-4882 x309

### **Nutrition**



UConn Cooperative Extension, Norwich: Family Nutrition Education and Food Stamp Nutrition Education Program, Free: 860-887-6599

TVCCA Women, Infant, Children Program (WIC): 860-425-6620

Day Kimball Women, Infant, Children Program (WIC): 860-928-3660

### **Gambling**



Bettor Choice Gambling Treatment Program:

Norwich, New London: 860-823-3094

CT Council on Problem Gambling: [www.ccp.org](http://www.ccp.org), 1-888-789-7777

Problem Gambling Services: 860-344-2244

Live chat available at [www.ucfs.org](http://www.ucfs.org)

### **Diabetes Management**



Diabetes Management Center, Backus Hospital, Norwich: (860) 892-6906

American Diabetes Association, 1-800-DIABETES, [www.diabetes.org](http://www.diabetes.org)

## **Physical Fitness & Healthy Weight**

Backus Weight Loss Center,

Norwich: 860-425-8740

Enjoy LIFE (Lifelong Investment in Fitness & Exercise), Plainfield Recreation Center: 860-889-8331 x2405

Let's Move! [www.letsmove.gov](http://www.letsmove.gov)

CURVES

- Jewett City, 860-376-8325



## **Mental Health, Stress Management and Substance Abuse**

United Community and Family Services

- Norwich: 860-892-7042

- Jewett City: 860-376-7040

- Plainfield: 860-822-4751

- Colchester: 860-537-7676

- New London: 860-442-4319



Southeastern Mental Health Authority, Norwich 860-859-4500

Alcoholics Anonymous CT: [www.aact.org](http://www.aact.org)

National Diabetes Education Program, [www.ndep.nih.gov](http://www.ndep.nih.gov)

### **Heart Disease Management**



Backus Hospital Community Blood Pressure Screening, Norwich - held 3rd Wednesday of each month, 860-889-8331 ext.2495

American Heart Association, 1-800-242-8721 [www.heart.org](http://www.heart.org)

Million Hearts—resources to provide tools to help manage heart disease, stroke risks, and to promote healthy and manageable goals, [www.millionhearts.hhs.gov](http://www.millionhearts.hhs.gov)

## COMMUNITY RESOURCE LIST

### Emergency Contacts



Police, Fire, Rescue – 911  
Poison Control - 1.800.222.1222  
Suicide Hotline - 1.800.273.8255  
Domestic Violence Hotline 1.888.774.2900  
Child Abuse Hotline 1.800.842.2288  
Emergency Contraception - 1.888.668.2.5283

### General Referral



United Way 2-1-1

By dialing 2-1-1, callers can get the most up-to-date information and referrals for all of their needs like shelter, clothing, financial, housing, food, and energy assistance.

### Financial Assistance

CT Department of Social Services Programs  
1.800.473.8909  
[www.ct.gov/dss](http://www.ct.gov/dss)



Norwich Human Services Programs  
1.860.823.3778  
[www.norwichct.org](http://www.norwichct.org)

### Housing Assistance



TVCCA Programs, Section 8 Housing  
1.860.425.6545  
[www.tvcca.org](http://www.tvcca.org)

Norwich Housing Authority Programs  
1.860.887.1605  
[www.norwichct.org](http://www.norwichct.org)

CT Housing & Finance Authority Programs  
1.860.721.9501  
[www.chfa.org](http://www.chfa.org)

Catholic Charities Programs  
1.860.889.8346  
[www.ccfns.org](http://www.ccfns.org)

### Food Assistance

WIC and TVCCA Eldercare Programs  
1.860.425.6545  
[www.tvcca.org](http://www.tvcca.org)

### Food Assistance - continued

CT Supplemental Nutrition Assistance Program (SNAP)

1.800.842.1508  
[www.ct.gov/dss](http://www.ct.gov/dss)



### Clothing and Furniture Assistance

Catholic Charities Programs  
1.860.889.8346  
[www.ccfns.org](http://www.ccfns.org)



Madonna Place Programs  
1.860.886.6600  
[www.madonnaplace.org](http://www.madonnaplace.org)

Salvation Army Programs - 1.860.889.2329

### Energy Assistance

Connecticut Light & Power Programs  
1.800.286.2828  
[www.cl-p.com](http://www.cl-p.com)



Yankee Gas Programs  
1.800.438.2278  
[www.yankeegas.com](http://www.yankeegas.com)

TVCCA Programs  
1.860.425.6681  
[www.tvcca.org](http://www.tvcca.org)

### Transportation & Communication

Transportation to Work Program  
1.860.859.4100 x 22  
[www.ewib.com](http://www.ewib.com)



Reliance House Transportation Program  
1.860.885.1908 x 264  
[www.reliancehouse.org](http://www.reliancehouse.org)

Assurance Wireless Programs  
1.800.392.3850  
www.assurancewireless.com

VEYO, Total Transit Company  
1.855-478-7350

### **Language Assistance**

Literacy Volunteers of Eastern CT  
1.860.443.4800  
www.englishhelp.org

### **Employment**

CT Works Programs  
860.859.5777  
www.ctdol.state.ct.us



Easter Seals Connecticut Work Program  
860.859.4148  
www.easterseals.com

Norwich Youth and Family Services  
860.823.3782  
[www.norwichct.org](http://www.norwichct.org)

TVCCA Programs  
860.425.6603  
www.tvcca.org

### **Online Eligibility Screening**



<https://connect.ct.gov/access/>  
<http://www.211navigator.org/>  
<http://cafcalculator.cafca.org/>

### **Health and Health Care Resources**

Planned Parenthood  
1.800.230.7526  
www.plannedparenthood.org

CT Birth to Three System  
1.800.505.7000  
www.birth23.org



Mental Health Association of CT  
1.800.529.1970  
www.mhact.org

National Alliance on Mental Health Illness  
860.882.0236  
www.nami.org

Community Substance Abuse Centers  
860.247.8300  
www.csacmethadone.com

Alcoholics Anonymous  
1.866.783.7712  
www.aa.org

### **Health and Health Care Resources - continued**

Narcotics Anonymous  
1.800.627.3543  
www.na.org

TVCCA Pharmacy Assistance Program  
860.425.6582  
www.tvcca.org



CT Bureau of Rehabilitation Service  
860.424.4844  
www.ct.gov/brs

CT Department of Veterans Affairs  
860.887.9162  
www.ct.gov/ctva

### **Legal Services**

CT Office of Health Care Access  
1.800.797.9688  
www.ct.gov/ohca

CT Office of Health Care Advocate  
1.800.466.4446  
www.ct.gov/oha



CT Office of Child Advocate  
1.800.994.0939  
www.ct.gov/oca

CT Parent Advocacy Center  
1.800.445.2722  
www.cpacinc.org

CT Office of Protection and Advocacy for Persons  
with Disabilities  
860.297.4300  
[www.ct.gov/opapd](http://www.ct.gov/opapd)

Northeast Health District  
860.774.7350  
[www.nddh.org](http://www.nddh.org)

Office of Victim Services  
1.800.822.8428  
[www.jud.ct.gov/crimevictim](http://www.jud.ct.gov/crimevictim)

### **Relocation Assistance**

Norwich Human Services Programs  
860.823.3778  
[www.norwichct.org](http://www.norwichct.org)

### **Cultural Organizations**

Chinese & American Cultural Assistance  
Organization  
860.373.0606  
[www.cacaa.org](http://www.cacaa.org)



### **Cultural Organizations - continued**

Eastern Connecticut Asian & American Lions Club  
[webmaster@aalionsclub.org](mailto:webmaster@aalionsclub.org)  
[www.e-clubhouse.org/sites/aaa](http://www.e-clubhouse.org/sites/aaa)

New London Korean Methodist Church  
[doctorsmc@yahoo](mailto:doctorsmc@yahoo)

First Haitian Baptist Church  
860.887.6193

### **Sovereign Nations**



Mashantucket Pequot Health Department  
860.313.8014

The Mohegan Tribe Health Department  
860.862.6158



### **Local Health Department**

Uncas Health District  
860.823.1189  
[www.uncashd.org](http://www.uncashd.org)



Ledgelight Health District  
860.448.4882  
[www.ledgelighthd.org](http://www.ledgelighthd.org)

## LOCATIONS

**The Edward & Mary Lord Family Health Center**  
47 Town Street, Norwich  
860-892-7042

**Griswold Health Center**  
226 East Main Street, Griswold  
860-376-7040

**Colchester Behavioral Health Center**  
212 Upton Road, Suite C, Colchester  
860-537-7676

**New London Health Center**  
351 North Frontage Road, Suite 24, New London  
860-442-4319

**Plainfield Health Center**  
120-122 Plainfield Road, Moosup  
860-822-4938

## Eldercare Services

**Sheltering Arms Residential Care**  
165 McKinley Avenue, Norwich  
860-887-5005 [ucfseldercare.org](http://ucfseldercare.org)

**Ross Adult Day Center**  
165 McKinley Avenue, Norwich  
860-889-1252 [ucfseldercare.org](http://ucfseldercare.org)

## School-Based Health Centers

**School-Based Health Center at Kelly STEAM Magnet Middle School**  
25 Mahan Drive, Norwich  
860-822-2803

**School-Based Health Center at John B. Stanton Elementary School**  
386 New London Turnpike, Norwich  
860-822-2803

**School-Based Health Center at Teacher's Memorial Global Studies Magnet Middle School**  
15 Teachers Drive, Norwich  
860-822-2803

**School-Based Health Center at Norwich Technical High School**  
7 Mahan Drive, Norwich  
860-822-2803

**School-Based Health Center at Norwich Free Academy (NFA)**  
305 Broadway, Norwich  
860-822-2803

**School-Based Health Center at Montville High School**  
800 Old Colchester Road, Oakdale  
860-822-2803

**School-Based Health Center at Tyl Middle School**  
166 Chesterfield Road, Oakdale  
860-822-2803

**School-Based Health Center at Waterford High School**  
20 Rope Ferry Road, Waterford  
860-822-2803

**School-Based Health Center at Clark Lane Middle School**  
105 Clark Lane, Waterford  
860-822-2803



**UCFS Healthcare**  
Well-Being Redefined.  
[UCFShealthcare.org](http://UCFShealthcare.org)



**UCFS Healthcare**  
Well-Being Redefined.

## Programs and Services

[UCFShealthcare.org](http://UCFShealthcare.org)



## PRIMARY AND SPECIALTY MEDICAL SERVICES

**Adult and Pediatric Primary Care**  
Comprehensive medical services with evening hours and 24 hour on-call.  
860-892-7042

**Gynecology**  
Care provided by a Certified Nurse Midwife, Physicians and Nurse Practitioners specializing in gynecological care including: preventive, diagnostic and acute care.  
860-892-7042

**Geriatric Assessment & Management Program**  
Memory testing and counseling for the patient and family. The physician works collaboratively with the patient's primary care physician. The goal of the program is to promote, restore and maintain functional independence.  
860-892-7042

## DENTAL HEALTH SERVICES

Comprehensive general dentistry, pediatric dentistry and preventive dental services to patients of all ages. Our Special Smiles Dental Operatory provides a comfortable, calming dental suite for children with dental phobia. Autism, special needs or for children making their first visit to the dentist.  
860-892-7042

**Smiles on the Move In-School Dental Program**  
Provides dental hygiene services using portable dental equipment in the school setting.  
860-822-2803

## ELDERCARE SERVICES

**Sheltering Arms**  
A Residential Care Home for men and women over 60 years of age, offering a less restrictive, dignified alternative for seniors who would benefit from supervised living. Residents receive help with personal care and medication administration from a nurse or round-the-clock resident attendants. The monthly fee covers a private room, all meals, personal laundry, housekeeping services and recreational activities.  
860-887-5005

**Ross Adult Day Center**  
Ross is a person centered, certified medical model adult day program for elders. Trained staff provide day time support and a range of fulfilling activities. Transportation is available to and from most of New London County. This is a great respite option for caregivers.  
860-889-1252

## COMMUNITY OUTREACH SERVICES

**Access to Care Program**  
Community Health Workers screen clients to determine their eligibility for insurance programs such as HUSKY/Medicaid, Access Health CT and others. Clients who are eligible are assisted in the application process.  
860-822-4798

**The Eastern Connecticut Medical Home Initiative**  
Provides care coordination services to children and youth with special health care needs and their families/caregivers. Care Coordinators work with children's health care providers to link children and families to medical, educational and other community-based services.  
860-822-4164

**Case Management**  
Support and coordination of services to clients struggling with basic needs such as stable housing, food, health insurance, employment and training or barriers accessing health care services.

## COMMUNITY BASED BEHAVIORAL HEALTH SERVICES

**Mobile Crisis Intervention Services (MCIS)**  
Services for children and adolescents who are experiencing a behavioral or mental health crisis. MCIS services are accessible 24 hours per day, 7 days per week, 365 days per year. For emergencies please call 211, for information call 860-822-4317

**Intensive Family Preservation (IFP)**  
In-home risk reduction and stabilization services for families referred by the Department of Children and Families.  
860-822-4312

**Multidimensional Family Therapy/HYPE Program**  
Provides intensive in-home individual and family therapy and case management services for youth and adolescents ages 9-21 years who are using substances or at risk thereof.  
860-705-7383

**Strengthening Families Together**  
Creates a customized plan with the types of treatment and support services to help you the most, so you can be the best parent/caregiver for your child.  
860-941-5267

**Early Childhood Consultation Partnership**  
Provides mental health consultation designed to meet the social and emotional needs of children birth to five by offering support, education and consultation to caregivers, early childhood centers and families.  
860-822-4325

## Child First

Intensive in-home clinical services for children through age five who are experiencing social, emotional and behavioral health difficulties and their families, using a system of care model.  
860-822-4905

**Care Coordination**  
Assists families without DCF services, in accessing and coordinating resources for their child with significant behavioral health needs using the Wraparound model.  
860-822-4301

**Family Based Recovery (FBR)**  
Provides intensive in-home services for families with children birth through age 5 who have been exposed to parental substance use.  
860-822-4766

**Kinship Navigator Program (CKIN)**  
Partners with kinship foster caregivers to provide the support, connection, and resources needed to raise resilient children.  
860-822-4285

## OUTPATIENT BEHAVIORAL HEALTH SERVICES

**Counseling and Psychotherapy**  
Provides a wide range of services (individual, couple, family and group therapy) to help clients with issues such as: grief, depression, anxiety, trauma, life crisis, parenting, divorce and separation, substance use, physical and sexual abuse and emotional and behavioral problems of children, adolescents and adults. In conjunction with therapy services we also offer psychiatric evaluation and medication management.  
860-822-4900

**Bettor Choice Gambling Treatment Program**  
Provides outpatient counseling (individual, couples, family and group) for adults (18+) who struggle with gambling as well as those affected by gambling (i.e., spouse, family members and significant others). Peer counseling services are also available.  
860-823-3094

**Autism**  
Offers a range of outpatient health, educational and behavioral services in one location for individuals with Autism and other developmental concerns including comprehensive assessments, psychopharmacology (medication), cognitive and behavioral interventions, social skills and communication, social learning groups, multi-family and parent groups.  
860-822-4793

**Medication Assisted Treatment**  
Combines behavioral therapy and medications to treat substance use disorders, MAT services include the use of medication, trained clinicians, prescribers trained in addiction medicine, on-site laboratory collection and a recovery coach to assist clients in the recovery process.  
860-822-4392

## **CLIENT'S RIGHTS AND RESPONSIBILITIES**

United Community & Family Services, Inc. (UCFS) is committed to providing quality of care to our clients and their families. We encourage clients and their families to be aware of their rights and responsibilities as listed below:

### **YOU HAVE THE RIGHT TO:**

1. Receive considerate and respectful care based on professional standards of practice.
2. Receive services without discrimination on the basis of race, color, sex, marital status, religion, age, handicap, sexual orientation or preference, national origin, ancestry or diagnosis.
3. Establish advance directives and participate in ethical decision making.
4. Receive an explanation of your diagnosis, treatment, and prognosis in terms you can understand.
5. Receive the necessary information to participate in decisions about your care and to give your informed consent before any diagnostic or therapeutic procedure is performed.
6. Refuse any treatment, except as prohibited by law, and to be informed of the consequences of making this decision, which may include informing Department of Children and Families or Protective Services.
7. Expect that your personal privacy will be respected by all staff of the agency.
8. Expect that your health records will be kept confidential in accordance with UCFS' Notice of Privacy Practices.
9. Know UCFS policy for accessing and disclosing information in your health records.
10. Receive a full explanation of any research or experimental procedure proposed for treatment and the opportunity to give your informed consent before any procedure will begin.
11. Know the name and qualification of all individuals providing service and how to contact that person.
12. Obtain another medical or dental opinion prior to any procedure.
13. Have your legal custodian access your written health records by appointment.
14. Ask for and receive information on your financial liability and an explanation of charges, including services that will be charged to your insurance, when applicable.
15. Request and receive a Good Faith Estimate of the fees expected for the services provided prior to receiving the services, if you are uninsured or self-pay and receiving outpatient medical, gynecological, dental or behavioral health services at UCFS.
16. File a complaint, either verbally or in writing, about services rendered without fear of discrimination from UCFS. Please call 8:30 a.m. to 4:30 p.m.
  - Sharon Laliberte, Compliance Officer, (860) 892-7042 x 1218.
  - If not satisfied with the resolution, you have the right to contact Jennifer Granger, CEO, at (860) 889-2375.

*An appeal process is available through the UCFS Quality Assurance Advisory Committee, which includes a clinical case review and conference between all treating providers.*

### **YOU ARE RESPONSIBLE FOR:**

1. Providing accurate personal, financial, insurance and medical information, including all medications and treatments, which is necessary to establish your plan of care.
2. Asking questions if you do not understand the explanation of your diagnosis, treatment, prognosis or any instructions.
3. Developing and participating in your treatment planning.
4. Following rules and regulations that are posted within the UCFS facilities while in those facilities.

5. Not carrying any type of weapons while at UCFS or when receiving treatment by UCFS staff.
6. Not harming or being verbally or physically abusive to other persons including UCFS staff.
7. Extending to agency staff the same courtesy given to you.
8. Keeping all scheduled appointments, arriving on time, and being able to participate in treatment.
9. Notifying UCFS with 24 hours notice or as soon as you are aware that you cannot keep an appointment.
10. Informing the health care professionals regarding any changes or reactions to medication and/or treatment.
11. Paying for services promptly including co-payments at the time of service.
12. Advising UCFS of any problems or dissatisfaction with the service being provided.
13. Providing for the supervision and safety of your children while in the facility.

If a client does not comply with above outlined responsibilities or if a significant unresolvable conflict or barrier develops between the provider and the client, it may become necessary to terminate services. Most commonly, such situations follow an episode or repeated episodes of abusive or threatening language/behavior, abuse of prescribed medications, or extreme non-compliance with the treatment plan, an emotional or physical threat to any staff member or another UCFS client, harassment, intolerable family interference with the provider-client relationship, or involvement in any illegal activity involving UCFS.

#### **Notice of Privacy Practices**

**Original Effective Date: April 14, 2003**

**Updated February, 2010**

**Updated July, 2012**

**Updated August, 2013**

**Updated April, 2019**

**Updated March, 2020**

**Update May, 2020**

#### **Purpose of the Notice of Privacy Practices**

This Notice of Privacy Practices (the "Notice") is meant to inform you about the privacy and confidentiality of your health information and how your health information may be used and disclosed by United Community & Family Services, Inc. ("UCFS" or "we" or "us"). It also describes your rights to access and control your health information and certain obligations we have regarding the use and disclosure of your health information.

Your "health information" for purposes of this Notice is information about you created and received by us, including demographic information, that may reasonably identify you and that relates to your past, present or future physical or mental health or condition, or payment for the provision of your health care.

UCFS is part of an organized health care arrangement including participants in Oregon Community Health Information Network (OCHIN). A current list of OCHIN participants is available at [www.ochin.org](http://www.ochin.org). As a business associate of UCFS, OCHIN supplies information technology and related services to UCFS and other OCHIN participants. OCHIN also engages in quality assessment and improvement activities on behalf of its participants. For example, OCHIN coordinates clinical review activities on behalf of participating organizations to establish best practice standards and access clinical benefits that may be derived from the use of electronic health record systems. OCHIN also helps participants work collaboratively to improve the management of internal and external patient referrals. Your personal health information may be shared by UCFS with other OCHIN participants or a health information exchange only when necessary for medical treatment or for the health care operation purposes

of the organized health care arrangement. Health care operation can include, among other things, geocoding your resident location to improve the clinical benefits you receive.

The personal health information may include past, present and future medical information as well as information outlined in the Privacy Rules. The information to the extent disclosed, will be disclosed consistent with the Privacy Rules or any other applicable law as amended from time to time. You have the right to change your mind and withdraw this consent. However, the information may have already been provided as allowed by you. This consent will remain in effect until revoked by you in writing. If requested you will be provided a list of entities to which your information has been disclosed.

We are required by law to maintain the privacy of your health information and to notify you in the event that there is a breach of your unsecured health information. We are also required by law to provide you with this Notice of our legal duties and privacy practices with respect to your health information and to abide by the terms of the Notice that are currently in effect. We may change the terms of this Notice at any time. The new revised Notice will apply to all of your health information maintained by us. You will not automatically receive a revised Notice. If you would like to receive a copy of the then-current Notice at any time you can obtain it through our web site at [www.ucfs.org](http://www.ucfs.org), by contacting UCFS, or by asking at your next appointment.

### **How We May Use or Disclose Your Health Information**

UCFS provides services through a broad continuum of programs, including outpatient medical services, behavioral health, dental, community based behavioral health, adult day care, and residential care. This Notice describes UCFS's practices and policies and applies to any health care professional authorized to enter information into our electronic health record, including our licensed providers, all departments and units within UCFS, any volunteers within UCFS, and any trainees or students at UCFS as part of a clinical program or similar educational program.

UCFS will ask you to sign a consent form that allows UCFS to use and disclose your health information for treatment, payment and health care operations. You will also be asked to acknowledge receipt of this Notice.

The following categories describe some of the different ways that we may use or disclose your health information. Even if not specifically listed below, UCFS may use and disclose your health information as permitted or required by law or as authorized by you. We will make reasonable efforts to limit access to your health information to those persons or classes of persons, as appropriate, in our workforce who need access to carry out their duties. In addition, if required, we will make reasonable efforts to limit the health information to the minimum amount necessary to accomplish the intended purpose of any use or disclosure and to the extent such use or disclosure is limited by law.

- **For Treatment** - We may use and disclose your health information to provide you with medical treatment and related services. Your health information may be used or disclosed to a treatment provider involved in your care. If we are permitted to do so, we may also disclose your health information to individuals or facilities that will be involved with your care after you leave UCFS and for other treatment reasons. We may also use or disclose your health information in an emergency situation. In certain circumstances, we may disclose health information about you to people outside of UCFS, such as family members, clergy or others that are involved in your care (as described below).
- **For Payment** - We may use and disclose your health information so that we can bill and receive payment for the treatment and related services you receive. For billing and payment purposes, we may disclose your health information to your payment source, including an insurance or managed care company, Medicare, Medicaid, or another third party payor. For example, we may need to give your health plan information about the treatment you received so your health plan will pay us or reimburse us for the treatment, or we may contact your health plan to confirm your coverage or to request prior authorization for a proposed treatment. If any of your services are paid for by the State of Connecticut as part of a grant, we may disclose your health information to support the services we provided you under the grant.
- **For Health Care Operations** - We may use and disclose your health information as necessary for operations of UCFS, such as quality assurance and improvement activities, reviewing the competence and



qualifications of health care professionals, medical review, legal services and auditing functions, and general administrative activities of UCFS. Your health information may be used by UCFS to perform case management for State, Federal or local funding sources. We may use an external clinical record reviewer in connection with our quality assurance activities. We may also disclose your health information to students or trainees who learn at UCFS to improve certain skills.

- **Within UCFS** – Your health information may be used by any UCFS department as necessary for treatment, payment and health care operations purposes so long as only the minimum amount of information necessary is used by UCFS for the purposes of payment and health care operations.
- **Business Associates** - There may be some services provided by outside entities under contract with UCFS to provide certain services involving the use of health information (known as “business associates”), such as a billing service, transcription company or legal or accounting consultants. We may disclose your health information to our business associates so that they can perform the job we have asked them to do. To protect your health information, we require our business associates to enter into a written contract that requires them to appropriately safeguard your information and report any breaches of health information to us.
- **Appointment Reminders** - We may use and disclose health information to contact you as a reminder that you have an appointment at UCFS.
- **Treatment Alternatives and Other Health-Related Benefits and Services** - We may use and disclose health information to tell you about or recommend possible treatment options or alternatives and to tell you about health related benefits, services, or medical education classes that may be of interest to you.
- **Individuals Involved in Your Care or Payment of Your Care** - Unless you object, we may disclose your health information to a family member, a relative, a close friend or any other person you identify, if the information relates to the person’s involvement in your health care or payment for your health care. In addition, we may disclose your health information to a public or private entity authorized by law to assist in a disaster relief effort. If you are unable to agree or object to such a disclosure we may disclose such information if we determine that it is in your best interest based on our professional judgment or if we reasonably infer that you would not object.
- **Personal Representatives** – You may designate an individual (a health care representative) to exercise certain medical decision-making on your behalf, or one may be designated by a court (e.g., a legal guardian) or by law (e.g., a parent if you are a minor). We will make sure the person has authority to act on your behalf as your personal representative, provided that we may not treat the person as your personal representative in certain circumstances.
- **Public Health Activities** - We may disclose your health information for public health purposes, including to a public health authority that is authorized by law to collect or receive such information, such as for the purpose of preventing or controlling disease, injury, or disability, to report births, deaths or other vital events, or report child abuse or neglect; for quality, safety or effectiveness of products regulated by the Food and Drug Administration; to notify a person who may have been exposed to a communicable disease or may be at risk of contracting or spreading a disease or condition; to an employer about a work-related illness or injury if we provide care at the employer’s request; or to provide proof of immunization to a school.
- **Health Oversight Activities** - We may disclose your health information to a health oversight agency for activities authorized by law, such as audits, investigations, inspections, accreditation, licensure and disciplinary actions.
- **Judicial and Administrative Proceedings** - If you are involved in a lawsuit or a dispute, we may disclose your health information in response to your authorization or a court or administrative order. We may also disclose your health information in response to a subpoena, discovery request, or other lawful process in certain situations in accordance with applicable law.
- **Law Enforcement** - We may disclose your health information for certain law enforcement purposes if permitted or required by law. Examples include reporting gunshot wounds; reporting emergencies or suspicious deaths; complying with a court order, warrant, or similar legal process; answering certain requests for information concerning crimes; evidence of criminal conduct on our premises; or identifying or locating a fugitive, suspect, witness, or missing person.
- **Coroners, Medical Examiners, Funeral Directors, Organ Procurement Organizations** - We may release health information to a coroner, medical examiner, funeral director, or, if you are an organ donor, to an organization involved in the donation of organs and tissues.
- **Research Purposes** - Your health information may be used or disclosed for research purposes, but only if the use and disclosure of health information has been reviewed and approved by a special Privacy Board

or Institutional Review Board, or if you provide authorization. UCFS participates in a number of activities and programs designed to promote better overall health and to allow us to serve you better. Part of these efforts includes screening some consumers for behaviors or habits that might make them less healthy or put them at risk. UCFS's own staff, and its contracted health educators, may ask you various questions about your habits and day-to-day activities as part of the information intake screening for your treatment. This will help us treat you, and allow us to provide you with the best options for other services that you may wish to utilize. Information that you share with our providers, or health educators, will become part of your record.

- **Fundraising** – We may use certain information about you to contact you for fundraising purposes. This information may include your name, address and other contact information, age, gender, and date of birth, the dates that you received health care services, department of service information, your treating physician, your outcome information, and your health insurance status. You have the right to opt out of receiving fundraising communications.
- **To Avert a Serious Threat to Health or Safety** - We may use and disclose your health information when necessary to prevent a serious threat to your health or safety or the health or safety of the public or another person. Any such disclosure would only be made to someone we believe can help prevent or lessen the threat.
- **Specialized Government Functions** - If you are a member of the armed forces, we may use and disclose your health information as required by military command authorities or the Department of Veterans Affairs. We may disclose your health information to authorized Federal officials for the conduct of lawful intelligence, counter-intelligence, and other national security activities authorized by law. We may disclose your health information to authorized Federal officials so they may provide protection to the President, other authorized persons or foreign heads of state or conduct special investigations. We may also disclose health information to correctional facilities about an inmate at such a facility in certain circumstances.
- **Workers' Compensation** - We may use or disclose your health information as permitted by laws relating to workers' compensation or related programs.
- **Special Rules Regarding Disclosure of Mental Health, Substance Use Disorder and HIV-Related Information** – Generally, we may disclose your health information for treatment, payment or health care operations purposes. Disclosures of health information relating to care for mental health conditions, substance use disorders (including drug or alcohol use), HIV-related testing and treatment, or minors, may be subject to certain special restrictions and require your specific authorization before we are permitted to make any such disclosure. For example, we generally may not disclose this specially protected information in response to a subpoena, warrant or other legal process unless you sign a specific authorization or a court orders the disclosure.
  - Mental health information. We will only disclose mental health information pursuant to an authorization, court order or as otherwise required or permitted by law. For example, all communications between you and a psychologist, psychiatrist, social worker and certain therapists and counselors will be privileged and confidential in accordance with Connecticut and Federal law.
  - Substance Use Disorder diagnosis and treatment information. If you are treated in a specialized substance use disorder program (including by a specialized substance use disorder provider at one of our facilities), any records of that treatment or otherwise pertaining to your substance use disorder are subject to heightened confidentiality and non-disclosure restrictions under Federal and state law and regulations. We may not disclose that you have been diagnosed with or received treatment for a substance use disorder or any information regarding your treatment, unless:
    1. You consent in writing;
    2. The disclosure is allowed by a court order; or
    3. The disclosure is made to medical personnel in a medical emergency or to qualified personnel for research, audit, or program evaluation, or to a qualified service organization or an entity with administrative control over a program covered under these Federal laws and regulations.

Violation of Federal laws and regulations governing the confidentiality of substance use disorder treatment records is a crime. Suspected violations may be reported to appropriate authorities in accordance with Federal regulations. Federal law and regulations do not protect any information

about a crime committed by a patient either at the substance use disorder program or against any person who works for the program or about any threat to commit such a crime. Federal laws and regulations also allow information about suspected child abuse or neglect to be reported under State law to appropriate State or local authorities. The Federal law and regulations governing substance use disorder treatment records can be found at 42 U.S.C. § 290dd-2 and 42 C.F.R. Part 2.

- HIV-related information. We may disclose HIV-related information as permitted or required by Connecticut law. For example, your HIV-related information, if any, may be disclosed without your authorization for treatment purposes, certain health oversight activities, pursuant to a court order, or in the event of certain exposures to HIV affecting personnel of UCFS, another person, or a known partner in certain circumstances.
- Minors. We will comply with Connecticut law when using or disclosing health information of minors. For example, if you are an un-emancipated minor consenting to a health care service related to HIV/AIDS, venereal disease, abortion, outpatient mental health treatment or alcohol/drug dependence, and you have not requested that another person be treated as a personal representative, you may have the authority to consent to the use and disclosure of your health information.

### **When We May Not Use or Disclose Your Health Information**

Except as described in this Notice, or as permitted by Connecticut or Federal law, we will not use or disclose your health information without your written authorization.

Your written authorization will specify particular uses or disclosures that you choose to allow. Under certain limited circumstances, UCFS may condition treatment on the provision of an authorization, such as for treatment related to research. If you do authorize us to use or disclose your health information for reasons other than treatment, payment or health care operations, you may revoke your authorization in writing at any time by contacting UCFS's Privacy Officer. If you revoke your authorization, we will no longer use or disclose your health information for the purposes covered by the authorization, but your revocation will not affect uses or disclosures made in reliance on the authorization prior to its revocation.

### ***Psychotherapy Notes***

A signed authorization or court order is required for any use or disclosure of psychotherapy notes except to carry out certain treatment, payment, or health care operations and for use by UCFS for treatment, for training programs, or for defense in a legal action.

### ***Marketing***

A signed authorization is required for the use or disclosure of your health information for a purpose that encourages you to purchase or use a product or service except for certain limited circumstances such as when the marketing communication is face-to-face or when marketing includes the distribution of a promotional gift of nominal value provided by UCFS. An authorization is not required to describe a health-related product or service provided by us; to make communications to you regarding your treatment or to direct or recommend alternative treatments, therapies, providers or settings of care for you.

### ***Sale of Health Information***

A signed authorization is required for the use or disclosure of your health information in the event that UCFS directly or indirectly receives remuneration for such use or disclosure, except under certain circumstances as allowed by Federal or Connecticut law.

## Your Health Information Rights

You have the following rights with respect to your health information. The following briefly describes how you may exercise these rights.

- **Right to Request Restrictions of Your Health Information** - You have the right to request certain restrictions or limitations on the health information we use or disclose about you. You may request a restriction or revise a restriction on the use or disclosure of your health information by providing a written request stating the specific restriction requested. You can obtain a Request for Restriction form from UCFS. We are not required to agree to your requested restriction, unless it involves the disclosure of health information to a health plan for purposes of carrying out payment or health care operations that pertains solely to a health care item or service for which UCFS has been paid out of pocket in full. If we do agree to accept your requested restriction, we will comply with your request except as needed to provide you with emergency treatment. If restricted health information is disclosed to a health care provider for emergency treatment, we will request that such health care provider not further use or disclose the information. In addition, you and UCFS may terminate the restriction if the other party is notified in writing of the termination. Unless you agree, the termination of the restriction is only effective with respect to health information created or received after we have informed you of the termination.
- **Right to Receive Confidential Communications** - You have the right to request a reasonable accommodation regarding how you receive communications of health information. You have the right to request an alternative means of communication or an alternative location where you would like to receive communications. You may submit a request in writing to UCFS requesting confidential communications. You can obtain a Request for Confidential Communications form from UCFS.
- **Right to Access, Inspect and Copy Your Health Information** - You have the right to access, inspect and obtain a copy (in paper or electronic form) of your health information that is used to make decisions about your care for as long as the health information is maintained by UCFS. If we maintain your information electronically in a designated record set, then you have the right to request an electronic copy of such information. To access, inspect and copy your health information that may be used to make decisions about you, you must submit your request in writing to UCFS. If you request a copy of the information, we may charge a fee for the costs of preparing, copying, mailing or other supplies associated with your request. We may deny, in whole or in part, your request to access, inspect and copy your health information under certain limited circumstances. If we deny your request, we will provide you with a written explanation of the reason for the denial. You may have the right to appeal this denial to an independent health care professional designated by us to act as a reviewing official. This individual will not have participated in the original decision to deny your request. You may also have the right to request a review of our denial of access through a court of law. All requirements, court costs and attorneys' fees associated with a review of denial by a court are your responsibility. You may want to seek legal advice if you are interested in pursuing your rights through a court.
- **Right to Amend Your Health Information** - You have the right to request an amendment to your health information for as long as the information is maintained by or for UCFS. Your request must be made in writing to UCFS and must state the reason for the requested amendment. You can obtain a Request for Amendment form from UCFS. If we deny your request for amendment, we will give you a written denial including the reasons for the denial and the right to submit a written statement disagreeing with the denial. We may rebut your statement of disagreement. If you do not wish to submit a written statement disagreeing with the denial, you may request that your request for amendment and your denial be disclosed with any future disclosure of your relevant information.
- **Right to Receive An Accounting of Disclosures of Health Information** - You have the right to request an accounting (a list) of certain disclosures of your health information by UCFS or by others on our behalf during the preceding six (6) years. To request an accounting of disclosures, you must submit a request in writing. The first accounting provided within a twelve-month period will be free. We may charge you a reasonable, cost-based fee for each future request for an accounting within a single twelve-month period. However, you will be given the opportunity to withdraw or modify your request for an accounting of disclosures in order to avoid or reduce the fee. In the event UCFS maintains an electronic health record, an accounting of disclosures from the electronic health record related to treatment, payment or health care operations will be made only for the three (3) year period preceding the request.
- **Right to Obtain A Paper Copy of Notice** - You have the right to obtain a paper copy of this Notice, even if you have agreed to receive this Notice electronically. You may request a copy of this Notice at any time by contacting UCFS. In addition, you may obtain a copy of this Notice at our web site, [www.ucfs.org](http://www.ucfs.org).

- **Right to File a Complaint** - You may file a complaint with us or the Secretary of the Department of Health and Human Services if you believe your privacy rights have been violated by us. You may file a complaint with us by notifying our Privacy Officer of your complaint. You will not be penalized for filing a complaint and we will make every reasonable effort to resolve your complaint with you.
- **UCFS Contact** – If you have any questions regarding this Notice, would like to contact UCFS regarding any aspects of the Notice or Forms referenced in the Notice, or you would like to file a complaint, you can contact UCFS's Privacy Officer using the contact information below:

United Community & Family Services, Inc.  
34 East Town Street  
Norwich, CT 06360  
Attention: Sharon Laliberte, Privacy Officer  
Telephone: 860-822-4148