

# CareCertify LLC

## Mental Health Clinic Training Series

MHC-03

# Confidentiality, HIPAA & 42 CFR Part 2 in the Clinic

## Participant Guide

Mental Health Clinic Training Series · Audience: Clinic Staff · Clinicians · Practitioners · Front-Office · Support · CE Hours: 1.0

## Protecting Information Is Everyone's Job

Clients share deeply private information with a mental health clinic, trusting that it will be protected. A web of laws — HIPAA, the Minnesota Health Records Act, the Government Data Practices Act, and the extra-strict 42 CFR Part 2 for substance use — protects that information, and protecting it is everyone's job, not just the clinician's.

This guide covers confidentiality, the laws, releases, exceptions, and everyday privacy practices. The bottom line: when in doubt about sharing information, check first, and protect privacy in every interaction across the clinic.

### Learning Objectives — by the end of this module you will be able to:

- Explain what confidentiality means in the clinic
- Identify the laws that protect client information
- Describe what 42 CFR Part 2 requires
- Apply releases of information and mandatory exceptions
- Use everyday privacy practices and prevent breaches

## Section 1: What Confidentiality Means in the Clinic

Confidentiality means protecting client information and sharing it only as the law allows. In a mental health clinic, even the fact that someone is a client can be protected information. Confidentiality applies everywhere — in conversation, on the phone, in records, and online — and at every desk, from reception to billing. It's both an ethical duty and a legal requirement, and it's foundational to the trust that lets clients seek care.

## Section 2: HIPAA and Minnesota Privacy Laws

Several laws protect client information. HIPAA sets federal health-privacy standards. The Minnesota Health Records Act (144.291-144.298) governs how health records are released in Minnesota. The Government Data Practices Act (ch. 13) covers government-held data. And 42 CFR Part 2 gives extra-strict protection to substance use treatment information. You don't need to be a lawyer — you need to know that client information is protected and to follow your clinic's policies.

### Section 3: 42 CFR Part 2 and Substance Use Information

Substance use disorder treatment information receives extra federal protection under 42 CFR Part 2. In general, you cannot disclose — or even acknowledge — that someone is receiving substance use treatment without specific written consent, beyond limited exceptions. Because many mental health clients have co-occurring substance use, be especially careful with any information touching substance use, and follow your clinic's Part 2 procedures.

### Section 4: Releases of Information

Sharing client information with people outside the treatment team usually requires the client's valid, signed release of information, which specifies what may be shared, with whom, for what purpose, and for how long. Share only what the release authorizes, and verify before disclosing. Within the treatment team, share on a need-to-know basis to coordinate care. When a release isn't in place, don't share — and don't confirm someone is a client.

### Section 5: Mandatory Exceptions to Confidentiality

Confidentiality is not absolute. Mandatory exceptions include reporting suspected maltreatment of vulnerable adults or children, and situations involving a serious risk of harm to the client or others, plus certain court orders and emergencies. These safety obligations can require disclosure. Tell clients up front about the limits of confidentiality, never promise total secrecy, and know your duties (covered in MHC-10). When a safety or legal situation arises, follow clinic policy and consult a supervisor.

#### **Tell clients the limits**

Explain at the start that you'll protect privacy but must act on safety — like risk of serious harm or abuse. Never promise to keep a safety concern secret.

### Section 6: Everyday Privacy Practices Across the Clinic

Most privacy breaches are everyday slips: discussing a client where others can hear, leaving a screen or chart visible, sharing on the phone without verifying consent, or signing in clients where others can see names. Protect privacy with simple habits — don't discuss clients in public or on social media, secure records and devices, verify identity and consent before disclosing, and use private spaces for sensitive conversations. These habits protect clients at every desk in the clinic.

### Section 7: Breaches and How to Prevent Them

A breach is an unauthorized access or disclosure of protected information — from a misdirected fax to a stolen laptop to a careless conversation. Prevent breaches with good privacy habits, secure systems, and care with records and devices. If a breach does happen, report it promptly per clinic policy so it can be addressed. Breaches harm clients and the trust they place in the clinic, and preventing them is everyone's responsibility.

### Section 8: When in Doubt, Check First

When you're unsure whether you can share information, pause and check with your supervisor or clinic policy before disclosing. A wrongful disclosure can't be taken back, and mental health information disclosed wrongly

can seriously harm a client. The safe default is always to protect privacy and check first. Protecting confidentiality is protecting the person and the trust that mental health care depends on.

## Key Terms

Term	What it means
Confidentiality	Protecting client information and sharing only as the law allows.
HIPAA	Federal law protecting health-information privacy.
MN Health Records Act	Minnesota law on releasing health records (144.291-144.298).
42 CFR Part 2	Federal rule giving extra protection to substance use records.
Release of information	A signed authorization specifying what may be shared.
Breach	An unauthorized access or disclosure of protected information.

## Check Your Understanding

1. Why is even confirming someone is a client sometimes protected?
2. Name the laws that protect client information.
3. What is special about 42 CFR Part 2?
4. When can you share information with an outside party?
5. What should you do if you're unsure whether to share?

## What's Next

### Looking ahead

Next, MHC-04: Clinical Documentation, the Golden Thread & Medical Necessity covers the records that support care and meet standards.