



## HSA HEALTH PLAN PRIVACY POLICY

This policy describes how information about you may be used and disclosed and how you access this information. Please review it.

### **Our Commitment**

We understand your privacy is important to you. The law defines "protected health information" or "PHI", as individually identifiable health information on the physical or mental condition of an Individual, which is transmitted or maintained in any form or medium. This includes facts of service and payment for health care service for individuals. This personal information is covered by federal and state privacy rules. As such, the use and disclosure of your information is regulated and enforced. As part of providing our services to you, you understand that we will obtain personal information about you. We treat the personal information we obtain from you or other sources, including business associates, and agents, in the course of providing you with our products and services seriously. Therefore, this privacy notice provides awareness on measures we take to protect your privacy. It also describes information we collect and how we use this information to conduct our business. We do not sell our customer lists or individual customer information. You agree that we may collect, use, and share information as described below.

### **Your Health Information Rights**

You may:

- Review and get a paper copy of your policy or claims records as allowed by law, usually within 30 days of your request (you can also ask us to provide a copy in electronic form, and we will do that if we can readily produce it);
- Request and be provided a paper copy of our current Notice of Privacy Practices, or receive an electronic copy by email if you have agreed to receive an electronic copy;
- Ask us to contact you at a specific address or phone number if contacting you at your current address or phone number could endanger you;
- Request and receive an accounting, as specified by law, of certain situations when your information was shared without your consent;
- Receive a notice if HSA Health Plan or one of its Business Associates causes a breach of your unsecured information;
- Report a privacy concern and be assured that HSA Health Plan will investigate your concern thoroughly, supporting you appropriately, and not retaliate against you in any way (in fact, HSA Health Plan will provide you with information on how to report any privacy concerns to the HSA Health Plan Compliance Officer or the Office for Civil Rights, U.S. Department of Health and Human Services); and
- Request in writing other restrictions on the use of your health information or amendments to your health information if you think it is wrong, though HSA Health Plan may not always be able to grant those requests.

### **What We Collect**

Information about you may come from the following;

- Information on applications or in communications with us such as your name, address, phone numbers, medical information, employment information, date of birth and social security number;
- Information about your transactions with us such as your account balance, fees, payments, and the identity of persons to whom you make payments including health care providers;
- Information from public sources such as government records;
- Information that we obtain from you on our website, including digital signature;



- We have developed policies and procedures to keep your personal information confidential and secure.
- We restrict access to those employees and other persons who must use that information to provide services on our behalf.
- We maintain physical, electronic and procedural safeguards, in compliance with applicable laws, regulations and industry standards, to protect the confidentiality of the personal information we obtain. Instructions for you to communicate in a confidential and secure manner with us are located on our website at [hsahealthplan.com](http://hsahealthplan.com).

### **How Your Health Information is Used**

#### Common Uses of Health Information.

As we provide health insurance benefits, we will gather some of your health information. The law allows us to use or share this health information for the following purposes:

- To receive payment of health coverage premiums and to determine and fulfill HSA Health Plan's responsibility to provide you benefits. For example, to make coverage determinations, administer claims, and coordinate benefits with other coverage you may have;
- To support health care providers in providing treatment;
- To share in limited circumstances health information with your plan sponsor. However, HSA Health Plan will only do so if the plan sponsor specifically requests health information for the administration of your health plan and agrees in writing not to use your health information for employment-related actions or decisions;
- To identify health-related services that may be beneficial to your health and then contact you about these services;
- To improve our services to you by allowing companies with whom we contract, called "business associates," to perform certain specialized work for us. The law requires these business associates to protect your health information and obey the same privacy laws that we do;
- To perform a very limited, specific type of health related research, where the researcher keeps any patient-identifiable Information safe and confidential. HSA Health Plan reviews every research request to make sure your privacy is appropriately protected before sharing any health information;
- To law enforcement, but only as authorized by law, i.e. to investigate a crime against HSA Health Plan or any of its members;
- To improve the overall HSA Health Plan system as well as to help better manage your care.

### **Required Uses of Health Information**

The law sometimes requires us to share information for specific purposes, including the following:

- To the Department of Health to report communicable diseases, traumatic injuries, or birth defects, or for vital statistics, such as a baby's birth;
- To a funeral director or an organ-donation agency when a patient dies, or to a medical examiner when appropriate to investigate a suspicious death;
- To state authorities to report child or elderly abuse;
- To law enforcement;
- To a correctional institution, if a member is an inmate, to ensure the correctional institution's safety;
- To the Secret Service or NSA to protect, for example, the country or the President;
- To a medical device's manufacturer, as required by the FDA, to monitor the safety of a



medical device;

- To court officers, as required by law, in response to a court order or a valid subpoena;
- To governmental authorities to prevent serious threats to the public's health or safety;
- To governmental agencies and other affected parties, to report a breach of health-information privacy;
- To a worker's compensation program if a person is injured at work and claims benefits under that program.

### **Uses According to Your Requests**

Your preferences matter. If you let us know how you want us to disclose your information in the following situation, we will follow your directions. You decide if you want us to share any health or payment information related to your care with your family members or friends. Please let our HSA Health Plan employees know what you want us to share. If you can't tell us what health or payment information you want us to share, we may use our professional judgment to decide what to share with your family or friends for them to be able to help you.

### **Uses With Your Authorization**

Any sharing of your health information, other than as explained above, requires your written authorization. For example, we will not use your health information unless you authorize us in writing to share any of your health information with marketing companies or sell any of your health information.

You can change your mind at any time about sharing your health information. Simply notify HSA Health Plan in writing. Please understand that we may not be able to get back health information that was shared before you changed your mind.

### **Special Legal Protections for Certain Health Information**

HSA Health Plan complies with federal laws that require extra protection for your health information if you receive treatment in an addiction treatment program, or from a psychotherapist who keeps notes on your therapy that are kept outside of your regular medical record.

HSA Health Plan is prohibited from using or disclosing genetic information for underwriting purposes.

### **If You Still Have Questions**

HSA Health Plan's Compliance Officer can help you with any questions you may have about the privacy of your health information. He can also address any privacy concerns you may have about your health information and can help you fill out any forms that are needed to exercise your privacy rights.

This privacy notice became effective on November 1, 2015. We may change this privacy notice at any time, and we may use new ways to protect your health information. We always post our current privacy notice on our website at [hsahealthplan.com](http://hsahealthplan.com).

You can also obtain a copy of this notice from any of HSA Health Plan's staff by calling us at 844-234-4472.