

BayCare Health Plans Notice of Privacy Practices

Your information. Your rights. Our responsibility.

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

Your Rights

When it comes to your health information, you have certain rights. This section explains your rights and some of our responsibilities to help you.

Get a copy of your health and claims records.

- You can ask to see or get a copy of your health and claims records and other health information we have about you. Ask us how to do this.
- We'll provide a copy or a summary of your health and claims records, usually within 30 days of your request. We may charge a reasonable, cost-based fee.

Correct your health and claims records.

You can ask us to correct your health and claims records if you think they're incorrect or incomplete. Ask us how to do this. We may say "no" to your request, but we'll tell you why in writing within 60 days of your request.

Request confidential communications.

You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address. We'll consider all reasonable requests and must say "yes" if you tell us you'd be in danger if we don't.

Ask us to limit what we use or share.

You can ask us **not** to use or share certain health information for treatment, payment or our operations. We aren't required to agree to your request, and we may say "no" if it would affect your care.

Get a list of those with whom we've shared information.

- You can ask for a list (accounting) of the times we've shared your health information for six years prior to the date you ask, who we shared it with and why.
- We'll include all the disclosures except for those regarding treatment, payment and health care operations, and certain other disclosures (*such as any you asked us to make*). We'll provide one accounting a year for free, but will charge a reasonable, cost-based fee if you ask for another one within 12 months.

Get a copy of this privacy notice.

You can ask for a paper copy of this notice at any time, even if you've agreed to receive the notice electronically. We'll provide you with a paper copy promptly.

Choose someone to act for you.

If you've 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. Before we take any action, we'll make sure this person has this authority and can act for you.



File a complaint if you feel your rights are violated.

- You can complain if you feel we've violated your rights by calling (866) 509-5396 (TTY: 711), 8am to 8pm, seven days a week.*
- You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights:
 - Send a letter to 200 Independence Avenue S.W., Washington, D.C. 20201.
 - Call (877) 696-6775.
 - Go to HHS.gov/OCR/Privacy/HIPAA/Complaints.
- You won't be retaliated against for filing a complaint.

Your Choices

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the following situations, talk to us. Tell us what you want us to do, and we'll follow your instructions.

In these cases, you have both the right and choice to tell us to:

- Share information with your family, close friends or others involved in payment for your care
- Share information during a disaster relief situation
- Contact you for fund-raising efforts

If you aren't able to tell us your preferences (if you're unconscious, for example), we may share your information if we believe it's in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.

In these cases, we never share your information unless you give us written permission:

- Marketing purposes
- Sale of your information

Our Uses and Disclosures

How do we typically use or share your health information?

We typically use or share your health information in the following ways.

Help manage the health care treatment you receive.

We can use your health information and share it with professionals who are treating you. *Example: A doctor sends us information about your diagnosis and treatment plan so we can arrange additional services.*

Run our organization.

- We can use and disclose your information to run our organization and contact you when necessary.
- We aren't allowed to use genetic information to decide whether we'll give you coverage and the price of that coverage. This doesn't apply to long term care plans. *Example: We use health information about you to develop better services for you.*

Pay for your health services.

We can use and disclose your health information as we pay for your health services. *Example: We share information about you with your dental plan to coordinate payment for your dental work.*

Our Uses and Disclosures (cont.)



Administer your plan.

We may disclose your health information to your health plan sponsor for plan administration. *Example: Your company contracts with us to provide a health plan and we provide your company with certain statistics to explain the premiums we charge.*

How else can we use or share your health information?

We're allowed or required to share your information in other ways, usually in ways that contribute to the public good, such as public health and research. We have to legally meet many conditions before we can share your information for these purposes.

For more information: HHS.gov/OCR/Privacy/HIPAA/Understanding/Consumers/Index.html

Help with public health and safety issues.

We can share health information about you for certain situations such as:

- Preventing disease
- Helping with product recalls
- Reporting adverse reactions to medications
- Reporting suspected abuse, neglect or domestic violence
- Preventing or reducing a serious threat to anyone's health or safety

Do research.

We can use or share your information for health research.

Comply with the law.

We'll share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law.

Respond to organ and tissue donation requests and work with a medical examiner or funeral director.

- We can share health information about you with organ procurement organizations.
- We can share health information with a coroner, medical examiner or funeral director when an individual dies.

Address workers' compensation, law enforcement and other government requests.

We can use or share health information about you:

- For workers' compensation claims
- For law enforcement purposes or with a law enforcement official
- With health oversight agencies for activities authorized by law
- For special government functions such as military, national security and presidential protective services

Our Uses and Disclosures (cont.)



Respond to lawsuits and legal actions.

We can share health information about you in response to a court or administrative order or in response to a subpoena.

Certain federal and state laws may require special HIPAA or privacy protections that restrict the use and disclosure of certain health information, including highly sensitive and protected information about you. Highly sensitive and protected information may include confidential information under federal and/or state laws governing alcohol and drug abuse information and genetic information, as well as laws that often protect the following types of information:

- Mental health
- Alcohol and drug abuse
- Genetic tests
- HIV/AIDS
- Sexually transmitted diseases and reproductive health information
- Child or adult abuse or neglect, including sexual assault

If a use or disclosure of health information described above in this notice is prohibited or materially limited by other laws that apply to us, it's our intent to meet the requirements of the more stringent law. Except for uses and disclosures described and limited as set forth in this notice, we'll use and disclose your health information only with a written authorization from you. This includes, except for limited circumstances allowed by federal privacy law, not using or disclosing psychotherapy notes about you, selling your health information to others, or using or disclosing your health information for certain promotional communications that are prohibited marketing communications under federal law, without your written authorization. Once you give us authorization to release your health information, we can't guarantee that the recipient to whom the information is provided won't disclose the information. You may take back or revoke your written authorization at any time in writing, except if we've already acted based on your authorization. To find out where to mail your written authorization and how to revoke an authorization, call the phone number listed on your health plan ID card.

Our Responsibilities

- We're required by law to maintain the privacy and security of your protected health information.
- We'll let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We won't use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you can change your mind at any time. Let us know in writing if you change your mind.

For more information: HHS.gov/OCR/Privacy/HIPAA/Understanding/Consumers/NoticePP.html

Changes to the Terms of This Notice

We 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 and on our website, and we'll mail a copy to you.

*You may reach a messaging service on weekends from April 1 through September 30 and holidays. Please leave a message, and your call will be returned the next business day.

This Notice of Privacy Practices applies to BayCare Health Plan. Effective October 1, 2018

H2235_24-003_C 23-2846251-0723