

HIPAA DISCLOSURE REGARDING USE AND DISCLOSURE OF PROTECTED HEALTH INFORMATION

A federal law, the Health Insurance Portability and Accountability Act of 1996, as amended (“HIPAA”), requires that health plans protect the confidentiality of your private health information. A complete description of your rights under HIPAA can be found in the Plan’s privacy notice, which was distributed to you upon enrollment. A copy of this notice is available from the Office of Human Resources. This section of the SPD will be effective as of April 14, 2004.

PERMITTED USES AND DISCLOSURES OF PHI

The Plan may use and disclose Protected Health Information (“PHI”) to the extent of and in accordance with the uses and disclosures permitted or required under the privacy regulations promulgated under HIPAA (hereinafter referred to as the “Privacy Rules”), including (i) for purposes related to Treatment, Payment, and Health Care Operations under the Plan; and (ii) as otherwise required under the Privacy Rules or applicable state law.

REQUIRED CERTIFICATION FROM THE UNIVERSITY OF FINDLAY

The Plan may disclose PHI to The University of Findlay only upon receipt of a certification from The University of Findlay, in the form required under the Privacy Rules, that the Plan documents have been amended to incorporate the provisions set forth in the next paragraph; however, the Plan may disclose Summary Health Information to The University of Findlay without that certification.

The certification described above will require The University of Findlay to comply with the following requirements:

- A. Not use or further disclose PHI other than as otherwise permitted or required by the Plan or applicable state and federal law (to the extent not preempted under ERISA);
- B. Ensure that any agents, including any subcontractor, to whom The University of Findlay provides PHI received from the Plan, agree to the same restrictions and conditions that apply to The University of Findlay with respect to PHI;

- C. Not use or disclose PHI for employment-related actions and decisions or in connection with any other benefit or plan maintained by The University of Findlay;
- D. Report to the Plan any use or disclosure of PHI that is inconsistent with the permitted or required uses or disclosures under this section of which The University of Findlay becomes aware;
- E. Allow each Participant and Qualified Beneficiary access to certain PHI to the extent required under the Privacy Rules;
- F. Provide each Participant and Qualified Beneficiary with the opportunity to amend PHI and incorporate any such amendment into such individual's PHI to the extent required under the Privacy Rules;
- G. Provide each Participant and Qualified Beneficiary with an accounting of disclosures of such individual's PHI to the extent required under the Privacy Rules;
- H. Provide the Secretary of the Department of Health and Human Services access to any internal practices, books, and records relating to the use and disclosure of PHI received from the Plan for purposes of determining the Plan's compliance with the Privacy Rules;
- I. To the extent feasible, return or destroy any and all PHI received from the Plan that The University of Findlay continues to maintain and retain no copies of such PHI when no longer needed for the purpose for which disclosure was made, except that, if that return or destruction is not feasible, The University of Findlay must limit further uses and disclosures to those purposes that make the return or destruction of the information infeasible; and
- J. Ensure that adequate controls are in place to restrict access of PHI to employees as described below.

RESTRICTED ACCESS TO PHI

The University of Findlay will permit only employees whose functions involve benefits administration and management to obtain access to PHI and the use or disclosure of such PHI will be permitted only for purposes of Plan administration functions that The University of Findlay performs for or on behalf of the Plan.

NONCOMPLIANCE

The University of Findlay will implement policies and procedures regarding any incident of noncompliance with the requirements under this section, including disciplinary sanctions, as appropriate.

DEFINITIONS

For purposes of this section, the following definitions will apply:

- A. “Health Care Operations” mean any activities of the Plan to the extent such activities are related to Plan functions, and, including but not limited to any of the following activities of an organized health care arrangement in which the Plan participates: (i) quality assessment and improvement activities; population-based activities relating to improving health or reducing health care costs, protocol development, case management and care coordination, contacting of Providers and patients with information about treatment alternatives; and related functions that do not include treatment; (ii) evaluating Plan and provider performance, including accreditation, certification, licensing, or credentialing activities; (iii) underwriting, premium rating, and other activities relating to the creation, renewal or replacement of a contract of health insurance or health benefits, and ceding, securing, or placing a contract for reinsurance of risk relating to claims for benefits (including stop-loss insurance and excess of loss insurance); (iv) conducting or arranging for medical review, legal services, and auditing functions of the Plan, including fraud and abuse detection and compliance programs; (v) business planning and development, such as conducting cost-management and planning-related analyses related to managing and operating the Plan, including formulary development and administration, development or improvement of methods of payment or coverage policies; and (vi) business management and general administrative activities of the Plan, including, but not limited to: (A) management activities relating to implementation of and compliance with the requirements under this Addendum; (B) customer service, including the provision of data analyses for policy holders, The University of Findlay, or other customers; (C) resolution of internal grievances; (D) due diligence in connection with the sale or transfer of assets to a potential successor in interest, if the potential successor in interest is a covered entity under the Privacy Rules or, following completion of the sale or transfer, will become such a covered entity; and (E) creating de-identified health information and marketing for which an individual authorization is not required under the HIPAA privacy regulations.
- B. “Payment” means any activities undertaken by (i) the Plan to obtain premiums or to determine or fulfill its responsibilities for coverage and provision of benefits under the Plan; or (ii) the Plan or a provider to obtain or provide reimbursement for the provision of health care including: (A) determinations of eligibility or coverage and adjudication or subrogation of claims under the Plan; (B) risk adjusting amounts due based on Participant or Qualified Beneficiary health status and demographic characteristics; (C) billing, claims management, collection activities, obtaining payment under a contract for reinsurance (including stop-loss insurance and excess of loss insurance), and related health care data processing; (D) review of health care services with respect to medical necessity, coverage under the Plan, appropriateness of care, or justification or charges; (E) utilization review activities, including precertification and preauthorization of services,

concurrent and retrospective review of services; (F) disclosure to consumer reporting agencies of any of the following PHI relating to collection of premiums or reimbursement: (1) name and address; (2) date of birth; (3) social security number; (4) payment history; (5) account number; and (6) name and address of the Provider or the Plan.

- C. “Protected Health Information” means “individually identifiable health information” that is transmitted via electronic media or that is transmitted or maintained in any other form or medium. “Individually identifiable health information” is information that (i) is created or received by the Plan, The University of Findlay, a Provider, or health care clearinghouse; and (ii) relates to the past, present, or future physical or mental health or condition of a Participant or Qualified Beneficiary under the Plan; the provision of health care to a Participant or Qualified Beneficiary under the Plan; or the past, present, or future payment for the provision of health care to a Participant or Qualified Beneficiary under the Plan; and (A) that identifies such individual; or (B) with respect to which there is a reasonable basis to believe the information can be used to identify such individual.
- D. “Summary Health Information” means information that has been de-identified as required under the Privacy Rules and that summarizes the claims history, claims expenses, or type of claims experienced by Participants or Qualified Beneficiaries under the Plan.
- E. “Treatment” means the provision, coordination, or management of health care and related services by one or more Providers, including the coordination or management of health care by a Provider with a third party; consultation between Providers relating to a patient; or the referral of a patient for health care from one Provider to another.

WHAT DOES ALL THIS MEAN?

This Plan, and The University of Findlay, will not use or disclose information that is protected by HIPAA (“protected health information”) except as necessary for treatment, payment, health plan operations and plan administration, or as permitted or required by law. By law, the Plan has required all of its business associates to also observe HIPAA’s privacy rules. In particular, the Plan will not, without authorization, use or disclose protected health information for employment-related actions and decisions or in connection with any other benefit or employee benefit plan of the Plan Sponsor.

Under HIPAA, you have certain rights with respect to your protected health information, including certain rights to see and copy the information, receive an accounting of certain disclosures of the information and, under certain circumstances, amend the information. You also have the right to file a complaint with the Plan or with the Secretary of the U.S. Department of Health and Human Services if you believe your rights under HIPAA have been violated.

This Plan maintains a privacy notice, which provides a complete description of your rights under HIPAA's privacy rules. For a copy of the notice please contact the Office of Human Resources. If you have questions about the privacy of your health information or if you wish to file a complaint under HIPAA, please contact Carole Spurgeon, HIPAA Privacy Officer, The University of Findlay, 1000 N. Main St. Findlay, OH 45840, 419.434.4871.