

Elderwood Health Plan NOTICE OF PRIVACY PRACTICES

The Notice of Privacy Practices (this “Notice”) describes how protected health information (“PHI”) about you may be used or disclosed, your rights regarding PHI, information regarding how you may gain access to your PHI, and the legal duties of Elderwood Health Plan, LLC (Elderwood) to protect member PHI.

HIPAA Privacy Regulations

This Notice follows the requirements of Privacy Regulations set forth in the federal Health Insurance Portability and Accountability Act of 1996 (“HIPAA”). The HIPAA Privacy Regulations require companies such as Elderwood to follow the terms of the Privacy Regulations and of this Notice.

The Privacy Regulations define PHI as:

- Information that identifies or can be used to identify a member.
- Information that either comes from the member or has been created or received by a health care provider, a health plan, the member’s employer, or a clearinghouse.
- Information that has to do with the physical or mental health or condition of a member, provision of health care to a member, or payment for provision of health care to a member.

Your Representation

You have the right to request a personal representative to act on your behalf, and Elderwood will treat that person as if the person were you. Please be aware, however, that unless you have applied restrictions, your personal representative will have full access to your entire PHI. You must make a request in writing if you would like someone to act as a personal representative. Please contact Member Services for more information at [1-855-200-6247](tel:1-855-200-6247).

Our Pledge Regarding Health Information

We understand that medical information about you and your health is personal. We are committed to protecting your medical information. We create a record of the care and services you receive through Elderwood. We need this record to provide you with quality care and to comply with certain legal requirements. This notice applies to all of the records of your care.

We are required by law to:

- Make sure that health information that identifies you is kept private.
- Give you this notice of our legal duties and privacy practices with respect to health information about you.
- Follow the terms of the notice.

Changes to this Notice

- We reserve the right to change this notice.
- We reserve the right to make the revised or changed notice effective for health information we already have about you as well as any information we receive in the future.
- A new notice that includes the changes and new effective dates will be mailed to you at the address in your medical record.
- You may also request a copy by calling Member Services at 1-855-200-6247.
- In addition, we will update the information on the Elderwood website.

How We May Use and Disclose Your Medical Information

The following categories describe different ways that we use and disclose PHI without authorization:

1. To assist in the coordination of medical treatment and services on behalf of a member.
2. When updating a member's service plan.
3. So that services received by a member may be reviewed for payment.
4. In order to make decisions about claims requests and appeals for services provided to members.
5. To contact a member for an appointment reminder.
6. For health care operations, such as using the information in a medical record to review the care and results in a member's case, and other cases like it, for quality improvement.
7. To send members information about managing chronic conditions.
8. In order to answer a customer service request.
9. In connection with an investigation into any fraud or abuse cases, and to make sure required rules are followed.
10. To contract with Business Associates who will provide services to Elderwood using a member's PHI. Services of our Business Associates may include document management services or a software vendor.
11. Business Associates will only use member PHI to do the job we have asked them to do.
12. All Business Associates must sign a contract to agree to protect the privacy of member PHI.
13. Elderwood will provide Business Associates with changes to this notice.
14. To a family member, other relative, close friend, or other personal representative that a member chooses. The extent of the disclosure of the PHI will be based on how involved the chosen person is in a member's care, or payment that relates to a member's care.
15. If law enforcement officials ask us to disclose the information, such as an order to respond to a subpoena.
16. For public health activities allowed or required by law, such as disease control.

17. When requested by researchers when an institutional review board or privacy board has followed the HIPAA information requirements.
18. To identify a deceased person, determine a cause of death, or to perform other coroner or medical examiner duties allowed by law.
19. To share information with funeral directors, as allowed by law, as well as organizations that handle organ donation and transplants.
20. If we feel it is needed to prevent or reduce a serious and likely threat to the health or safety of a person or the public.
21. If a member is an organ donor, for the release of minimally necessary member PHI to organizations that handle organ procurement or organ, eye or tissue transplantation or to an organ donation bank, as necessary to facilitate organ or tissue donation and transplantation.
22. If a member is or was in the Armed Forces, for activities believed necessary by appropriate military command authorities.
23. To share PHI with the Secretary of the U.S. Department of Health and Human Services. This happens when the Secretary looks into or decides if Elderwood is in compliance with the HIPAA Privacy Regulations.
24. When required to, we will obtain your authorization before disclosing any of your information.
25. Except with regard to disclosures for treatment, only the minimally necessary information will be revealed during any disclosures.