# NOTICE OF PRIVACY PRACTICES

**THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY**.

Effective Date of Notice: April 14, 2003

While Anthem Blue Cross Blue Shield is our Third Party Administrator (TPA) for Health Insurance, The City of Meriden and The Board of Education is a self-insured entity and as such there are certain measures we need to take in order to be HIPAA compliant. Effective April 14, 2003, The City of Meriden and The Board of Education Health Plan is required by law to take reasonable steps to ensure the privacy of your personally identifiable health information and to inform you about:

- The City of Meriden and The Board of Education Health Plan use and disclosures of Protected Health Information (PHI);
- Your privacy rights with respect to your PHI;
- The City of Meriden and The Board of Education's Health Plan duties with respect to your PHI;
- Your right to file a complaint with The City of Meriden and The Board of Education Health Plan and to the Secretary of the U.S. Department of Health and Human Services; and
- The person or office to contact for further information about The City of Meriden and The Board of Education Health Plan privacy practices.

The term "Protected Health Information" (PHI) includes all individually identifiable health information transmitted or maintained by The City of Meriden and The Board of Education Health Plan regardless of form (oral, written, electronic). Your PHI is maintained in the enrollment, payment, claims adjudication, and case or medical management records systems maintained by our TPA and us.

## Section 1. Notice of PHI Uses and Disclosures

***Required PHI Uses and Disclosures***

Upon your request, The City of Meriden and The Board of Education Health Plan is required to give you access to certain PHI in order to inspect and copy it.
Use and disclosure of your PHI may be required by the Secretary of the department of Health and Human Services to investigate or determine The City of Meriden and The Board of Education's Health Plan compliance with the privacy regulations.

**Uses and disclosures to carry out treatment, payment and health care operations.**

The City of Meriden and The Board of Education's Health Plan and its business associates will use PHI without your consent, authorization or opportunity to agree or object to carry out treatment, payment and health care operations. The City of Meriden and The Board of Education also will disclose PHI to the Plan Sponsor, Anthem Blue Cross Blue Shield of Connecticut, for purposes related to treatment, payment and health care operations. Anthem Blue Cross Blue Shield of Connecticut has amended its plan documents to protect your PHI as required by federal law.

***Treatment*** is the provision, coordination or management of health care and related services. It also includes but is not limited to consultations and referrals between one or more of your providers.

For example, The City of Meriden and The Board of Education Health Plan may disclose to a treating orthodontist the name of your treating dentist so that the orthodontist may ask for your dental X-rays from the treating dentist.

***Payment*** includes but is not limited to actions to make coverage determinations and payment (including billing, claims management, subrogation, plan reimbursement, reviews for medical necessity and appropriateness of care and utilization review and preauthorizations).

For example, The City of Meriden and The Board of Education Health Plan may tell a doctor whether you are eligible for coverage or what percentage of the bill will be paid by the The City of Meriden and The Board of Education Health Plan.

***Health care operations*** include but are not limited to quality assessment and improvement, reviewing competence or qualifications of health care professionals, underwriting, premium rating and other insurance activities relating to creating or renewing insurance contracts. It also includes disease management, case management, conducting or arranging for medical review, legal services and

auditing functions including fraud and abuse compliance programs, business planning and development, business management and general administrative activities.

For example, The City of Meriden and The Board of Education Health Plan may use information about your claims to refer you to a disease management program, project future benefit costs or audit the accuracy of its claims processing functions.

**Uses and disclosures that require your written authorization.**

The City of Meriden and The Board of Education Health Plan will use or disclose psychotherapy notes about you from your psychotherapist. Psychotherapy notes are separately filed notes about your conversations with your mental health professional during a counseling session. They do not include summary information about your mental health treatment. The City of Meriden and The Board of Education Health Plan may use and disclose such notes when needed by The City of Meriden and The Board of Education Health Plan and after appropriate authorization is received by you or a court.

**Uses and disclosures that require that you be given an opportunity to agree or disagree prior to the use or release.**

Disclosure of your PHI to family members, other relatives and your close personal friends is allowed if:

- the information is directly relevant to the family or friend's involvement with your care or payment for that care; and
- You have either agreed to the disclosure or have been given an opportunity to object and have not objected.
- Disclosures to an organization assisting in disaster relief efforts. Even if you object, we may still share information about you if necessary to respond to emergency circumstances.

**Uses and disclosures for which consent, authorization or opportunity to object is not required**.

Use and disclosure of your PHI is allowed without your consent, authorization or request under the following circumstances:

(9) When required by law.

(10) When permitted for purposes of public health activities, including when necessary to report product defects, to permit product recalls and conduct post-marketing surveillance. PHI may also be used or disclosed if you have been exposed to a communicable disease or are at risk of spreading a disease or condition, if authorized by law.

(11) When authorized by law to report information about abuse or neglect to public authorities if there exists a reasonable belief that you may be a victim of abuse or neglect. In such case, The City of Meriden and The Board of Education Health Plan will promptly inform you that such a disclosure has been or will be made unless that notice would cause a risk of serious harm. For the purpose of reporting child abuse or neglect, it is not necessary to inform the minor that such a disclosure has been or will be made. Disclosure may generally be made to the minor's parents or other representatives although there may be circumstances under federal or state law when the parents or other representatives may not be given access to the minor's PHI.

(12) The City of Meriden and The Board of Education Health Plan may disclose your PHI to a public health oversight agency for oversight activities authorized by law. This includes uses or disclosures in civil, administrative or criminal investigations; inspections; licensure or disciplinary actions (for example, to investigate complaints against providers); and other activities necessary for appropriate oversight of government benefit programs (for example, to investigate Medicare or Medicaid fraud).

(13) The City of Meriden and The Board of Education Health Plan may disclose your PHI in response to a court order or when required for judicial or administrative proceedings. For example, in limited circumstances, your PHI may be disclosed in response to a subpoena or discovery request.

(14) When required for law enforcement purposes (for example, to report certain types of wounds), or for the purpose of identifying or locating a suspect, fugitive, material witness or missing person. Also, when disclosing information about an individual who or is suspected to be a victim of a crime but only if the individual agrees to the disclosure or the covered entity is unable to obtain the individual's agreement because of emergency circumstances. When required to be given to a coroner or medical examiner for the purpose of identifying a deceased person, determining a cause of death or other duties as authorized by law. Also, disclosure is permitted to funeral directors, consistent with applicable law, as necessary to carry out their duties with respect to the decedent.

(15) The City of Meriden and The Board of Education Health Plan may use or disclose PHI for research, provided that the privacy and safety aspects of the research have been reviewed and approved by an institutional review board or a privacy board.

(16) When consistent with applicable law and standards of ethical conduct if The City of Meriden and The Board of Education Health Plan, in good faith, believes the use or disclosure is necessary to prevent or lessen a serious and imminent threat to

the health or safety of a person or the public and the disclosure is to a person reasonably able to prevent or lessen the threat, including the target of the threat.

(17) When authorized by and to the extent necessary to comply with workers' compensation or other similar programs established by law.

(18) To the City of Meriden and the Board of Education Health Plan's plan sponsor, when the City of Meriden and the Board of Education Health Plan has been informed that appropriate language has been included in the plan documents

(19) To business associates who provide services to us and assure us they will protect the information.

(20) To authorized federal officials conducting national security, counterintelligence, and intelligence activities authorized by law.

(21) If you are a member of the armed forces, we may use and disclose your Protected Health Information as required by military command authorities. We may also disclose your Protected Health Information to the appropriate foreign military authority if you are a member of a foreign military.

(22) To authorized federal officials, as needed, to provide protection to the President of the United States, other authorized persons, foreign heads of states or to conduct certain special investigations.

(23) To our third party administrator in providing you with treatment alternatives, treatment reminders, or other health-related benefits and services. This may include telling you about: treatments; services; products; other health care providers; special programs; or nutritional services, among others.

Except as otherwise indicated in this notice, uses and disclosures will be made only with your written authorization. You may revoke this authorization, in writing, at any time. If you revoke your authorization, we will no longer use and/or disclose your PHI for the purposes covered by that authorization, except where we have already relied upon the authorization.

**Section 2. Rights of Individuals**

***Right to Request Restriction on PHI Uses and Disclosures***

You may request The City of Meriden and The Board of Education Health Plan to restrict uses and disclosures of your PHI to carry out treatment, payment or health care operations, or to restrict uses and disclosures to family members, relatives, friends or other persons identified by you who are involved in your care or payment for your care. However, The City of Meriden and The Board of Education Health Plan is not required to agree to your request.

The City of Meriden and The Board of Education Health Plan will accommodate reasonable requests to receive communications of PHI by alterative means or at alternative locations.

You or your personal representative will be required to complete a form to request restriction on uses and disclosure of your PHI. Such requests should be made to the following office: Anthem Blue Cross and Blue Shield of Connecticut, 370 Bassett Rd., North Haven, CT 06473.

***Rights to Inspect and Copy PHI***

You have the right to inspect and obtain a copy of your PHI contained in a "designated record set," for as long as The City of Meriden and The Board of Education Health Plan maintains the PHI.
***"Protected Health Information***: (PHI) includes all individually identifiable health information transmitted or maintained by The City of Meriden and The Board of Education Health Plan, regardless of form.
***"Designated Record Set"*** includes the medical records and billing records about individuals maintained by or for a covered health care provider; enrollment, payment, billing, claims adjudication and case or medical management record systems maintained by or for a health plan; or other information used in whole or in part by or for the covered entity to make decisions about individuals. Information used for quality control or peer review analyses and not used to make decisions about individuals is not in the designated record set.

The requested information will be provided within 30 days if the information is maintained on site or within 60 days if the information is maintained offsite. A single 30-day extension is allowed if The City of Meriden and The Board of Education Health Plan is unable to comply with the deadline.

You or your personal representative will be required to complete a form to request access to the PHI in your designated record set. Requests for access to PHI should be made to the following officer: **Anthem Blue Cross and Blue Shield of Connecticut, 370 Bassett Rd., North Haven, CT 06473.**

If access is denied, you or our personal representative will be provided with a written denial setting forth the basis for the denial, a description of how you may exercise those review rights and a description of how you may complain to the Secretary of the U.S. Department of Health and Human Services.

***Right to Amend PHI***

You have the right to request The City of Meriden and The Board of Education Health Plan to amend your PHI or a record about you in a designated record set for as long as the PHI is maintained in the designated record set.

The City of Meriden and The Board of Education Health Plan has 60 days after the request is made to act on the request. A single 30-day extension is allowed if The City of Meriden and The Board of Education Health Plan is unable to comply with the deadline and if the individual is given a written statement explaining the reasons for the delay and the date on which the amendment will be provided. If the request is denied in whole or part, The City of Meriden and The Board of Education Health Plan must provide you with a written denial that explains the basis for the denial. You or your personal representative may then submit a written statement disagreeing with the denial and have that statement included with any future disclosures of your PHI or you may request that a copy of your request and a copy of the denial be included with all future disclosures of the PHI.

Requests for amendment of PHI in a designated record set should be made to the following officer: **Anthem Blue Cross and Blue Shield, 370 Bassett Rd., North Haven, CT 06473**

You or your personal representative will be required to complete a form to request amendment of the PHI in your designated record set.

***The Right to Receive an Accounting of PHI Disclosures***

At your request, The City of Meriden and The Board of Education Health Plan will also provide you with an accounting of disclosures by The City of Meriden and The Board of Education Health Plan of your PHI during the six years prior to the date of your request. However, such accounting need not include PHI disclosures made: (1) to carry out treatment, payment or health care operations: (2) to individuals about their own PHI; (3) prior to the compliance date; or (4) based on your written authorization; (5) incidental disclosures; (6) limited data sets; (7) to individuals involved in your care or payment for your care; (8) national security and intelligence activities; and (9) disclosures to law enforcement or correctional officials about an inmate in custody.

If the accounting cannot be provided within 60 days, an additional 30 days is allowed if the individual is given a written statement of the reasons for the delay and the date by which the accounting will be provided.

If you request more than one accounting within a 12-month period, The City of Meriden and The Board of Education Health Plan will charge a reasonable, cost-based fee for each subsequent accounting.

***The Right to Receive a Paper Copy of This Notice Upon Request***

**You have the right to request a paper copy of this Notice even if you have agreed to receive it electronically. To obtain additional copies of this Notice contact the following officer: Caroline Beitman, Personnel Director, 142 East Main Street, Meriden, CT 06450, Phone 203/630-4037. You can also obtain a copy of this Notice on The City of Meriden website, www.cityofmeriden.org or The Board of Education website, www.meriden.k12.ct.us.**

***A Note About Personal Representatives***

An individual has the authority, at any time, to designate, in writing, any individual as his/her authorized representative with respect to the rights mentioned within this Notice. You may exercise your rights through a personal representative. Your personal representative will be required to produce evidence of his/ her authority to act on your behalf before that person will be given access to your PHI or allowed to take any action for you. Proof of such authority may take one of the following forms:

- A power of attorney for health care purposes, notarized by a notary public;

- A court order of appointment of the person as the conservator or guardian of the individual; or
- An individual who is the parent of a minor child.

The City of Meriden and The Board of Education Health Plan retains discretion to deny access to your PHI to a personal representative to provide protection to those vulnerable people who depend on others to exercise their rights under these rules and who may be subject to abuse or neglect. This also applies to personal representatives of minors.

**Section 3. The Plan's Duties**

The City of Meriden and The Board of Education Health Plan is required by law to maintain the privacy of PHI and to provide individuals (participants) with notice of its legal duties and privacy practices.

This notice is effective beginning April 14, 2003, and The City of Meriden and The Board of Education Health Plan is required to comply with the terms of this notice. However, The City of Meriden and The Board of Education Health Plan reserves the right to change its privacy practices and to apply the changes to any PHI received or maintained by The City of Meriden and The Board of Education Health Plan prior to that date. If a privacy practice is changed, a revised version of this notice will be provided [to all past and present participants] for whom The City of Meriden and The Board of Education Health Plan still maintains PHI. [The City of Meriden and The Board of Education Health Plan must describe how the notice will be provided.]

Any revised version of this notice will be distributed within 60 days of the effective date of any material change to the uses or disclosures, the individual's rights, the duties of The City of Meriden and The Board of Education Health Plan or other privacy practices stated in this notice. The City of Meriden and the Board of Education Health Plan will also post the revised Notice on our websites, www.cityofmeriden.org and www.meriden.k12.ct.us

***Minimum Necessary Standard***

When using or disclosing PHI or when requesting PHI from another covered entity, The City of Meriden and The Board of Education Health Plan will make reasonable efforts not to use, disclose or request more that the minimum amount of PHI necessary to accomplish the intended purpose of the use, disclosure or request, taking into consideration practical and technological limitations.

However, the minimum necessary standard will not apply in the following situations:
- Disclosures to or requests by a health care provider for treatment;
- Uses or disclosures made to the individual;
- Disclosures made to the Secretary of the U.S. Department of Health and Human Services;
- Uses or disclosures that are required by law; and
- Uses or disclosures that are required for The City of Meriden and The Board of Education's Health Plan compliance with legal regulations.

**Special Rules Regarding the Disclosure of Highly Confidential Information**

Federal and applicable state laws may require special privacy protections for highly confidential information about you. This may include confidential information under federal law governing alcohol and drug abuse information as well as state laws that protect the following types of information:

- HIV/AIDS;
- Mental Health;
- Alcohol and drug abuse;
- Genetic tests; and
- Abuse, neglect or violence reporting.

This notice does not apply to information that has been de-identified. De-identified information is information that does not identify an individual and with respect to which there is no reasonable basis to believe that the information can be used to identify an individual.

In addition, The City of Meriden and The Board of Education Health Plan may use or disclose "summary health information" to the plan sponsor for obtaining premium bids or modifying, amending or termination of the group health plan, which summarizes the claims

history, claims expenses or type of claims experienced by individuals for whom a plan sponsor has provided health benefits under a group health plan; and from which identifying information has been deleted in accordance with HIPAA.

**Section 4. Your Right to File a Complaint With The City of Meriden and The Board of Education or the HHS Secretary**

If you believe that your privacy rights have been violated, you may complain to The City of Meriden and The Board of Education Health Plan in care of the following officer: **City of Meriden – Privacy Official – Legal Department, 142 East Main Street, Meriden, CT 06450, Phone 203/630-4045.**

You may file a complaint with the Secretary of the U.S. Department of Health and Human services, Hubert H. Humphrey Building, 200 Independence Avenue S.W., Washington, D.C. 20201.

The City of Meriden and The Board of Education Health Plan will not retaliate against you for filing a complaint.

**Section 5. Whom to Contact at The City of Meriden and the Board of Education for More Information**

If you have any questions regarding this notice or the subjects addressed in it, you may contact the following officer: **Caroline Beitman, Personnel Director, City of Meriden, 142 East Main Street, Meriden, CT 06450 , Tel. 203-630-4037 or David Roy, Personnel Director, Board of Education, 22 Liberty St., Meriden, CT 06450, Tel. 203-630-4209**

**Connecticut Law**
The City of Meriden and The Board of Education will also abide by the Connecticut Law that may require stricter rules than provided by HIPAA to protect privacy.