



NOTICE OF PRIVACY PRACTICES

Effective Date: April 14, 2003
Revised: September 13, 2019

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

PROTECTION OF INFORMATION

MediGold¹ understands that your information is highly personal and is committed to safeguarding your protected health information ("PHI"). Please read this Notice of Privacy Practices thoroughly. MediGold is required by law to maintain the privacy of PHI. We are required to provide you with notice of our legal duties and privacy practices with respect to PHI. We will only use or disclose your PHI as permitted or required by applicable state or federal law. MediGold can help you understand our privacy practices and your rights.

PERMITTED USES AND DISCLOSURES

Treatment:

We may use and disclose PHI to doctors, hospitals, pharmacies and/or other health care providers who are involved in your care and treatment.

For example, doctors may request PHI from us for coordination of care purposes or doctors may send MediGold information about your diagnosis and treatment plan so we can arrange additional services. MediGold may also disclose your PHI to health care providers in connection with preventive health, early detection and disease and case management programs.

Payment:

To help pay for your covered services, we may use and disclose PHI in a number of ways – in conducting utilization and medical necessity reviews; coordinating care; determining eligibility and coverage; determining prescription drug compliance; collecting premiums; calculating cost-sharing amounts and coordination of benefits; and responding to complaints, appeals and requests for external review.

For example, we may use your medical history and other health information about you to decide whether a treatment is a covered benefit and what the payment should be – and during the process we may disclose information to your provider. We also use PHI to obtain payment for any mail-order pharmacy services provided to you or to obtain payment for premiums.

Health Care Operations:

MediGold may use and disclose PHI about you to develop better services for you. Other routine operations requiring use and disclosure of PHI include population health and wellness; underwriting and premium rating; administration of pharmacy benefit programs; coordination of benefits; and other general administrative activities including information resources and data management. MediGold is specifically prohibited from using or disclosing PHI that is genetic information of an individual for underwriting purposes as required by the Genetic Information and Nondiscrimination Act ("GINA").

Other Uses and Disclosures:

¹ For purposes of this notice, "MediGold" and the pronouns "we", "us" and "our" refer to Mount Carmel Health Plan, Inc. and Mount Carmel Health Insurance Company and all their respective subsidiaries, including but not limited to the entities listed on the last page of this notice. These entities have been designated as a single affiliated covered entity for federal privacy purposes.

Information and Health Promotion Activities: MediGold may use and disclose some of your PHI for certain health promotion activities. For example, your name and address may be used to send you newsletters or general communications. MediGold may also send you information based on your own health concerns. MediGold may send you this information if it has determined that a product or service may help you. These communications will explain how the products or services relate to your well-being and can improve your health.

Research: Under certain circumstances, MediGold may use and disclose your PHI for research purposes. Research projects are subject to a special approval process. This process evaluates a proposed research project and its use of medical information, trying to balance the research needs with patients' need for privacy of their medical information. Researchers are required to safeguard all PHI they receive. MediGold may disclose your PHI without your authorization to medical researchers who request it for approved medical research projects; however, with very limited exceptions such disclosures must first be cleared through this special approval process.

More Stringent State and Federal Laws: There may be times where certain areas of state law is more stringent than the Health Insurance Portability and Accountability Act and associated regulations ("HIPAA"). Certain federal laws also are more stringent than HIPAA. MediGold will continue to abide by these more stringent state and federal laws.

- ◆ **More Stringent Federal Laws:** The federal laws include applicable internet privacy laws, such as the Children's Online Privacy Protection Act and the federal laws and regulations governing the confidentiality of health information regarding substance abuse treatment.
- ◆ **More Stringent State Laws:** State law is more stringent when the individual is entitled to greater access to records than under HIPAA. State law also is more restrictive when the records are more protected from disclosure by state law than under HIPAA. For example, Ohio law may require that we obtain your authorization before releasing records containing HIV/AIDS diagnosis or before disclosing information regarding treatment you received at an Ohio licensed behavioral health facility. And in Idaho, electronic medical records must be provided by hospitals within three (3) days of the request being received.

PERMITTED USES OR DISCLOSURES WITH AN OPPORTUNITY FOR YOU TO AGREE OR OBJECT

Family/Friends: MediGold may disclose PHI about you to a friend or family member who is involved in your medical care. MediGold may also give information to someone who helps you pay for your care. You have a right to request that your PHI not be shared with some or all of your family or friends.

OTHER PERMITTED USES AND DISCLOSURES

MediGold may also disclose your PHI as follows:

Administer your plan: We may disclose PHI to your health plan sponsor for plan administration. For 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.

Business Associates: To organizations that provide services to us and assure us in writing that they will protect the information. MediGold will give out as little information as possible to allow our business associates to complete these tasks and MediGold requires these business associates to appropriately safeguard the privacy of your information.

Membership in Trinity Health: Members of Trinity Health (including MediGold) participate together in an organized health care arrangement for utilization review and quality assessment activities with respect to this information. Members of Trinity Health may also use your PHI for treatment, payment and/or health care operations permitted by HIPAA with respect to operations of the organized health care arrangement.

USES AND DISCLOSURES PERMITTED BY PUBLIC POLICY OR LAW WITHOUT YOUR AUTHORIZATION

Law Enforcement: MediGold will use and disclose PHI to federal, state, and local law enforcement officials as required by applicable law, such as identifying a criminal suspect or a missing person, or providing information about a crime victim or criminal conduct.

Legal Proceedings: MediGold will use and disclose PHI in response to a court order or other lawful purpose.

Required by Law: MediGold will disclose PHI about you when required by federal, state or local law to make reports or other disclosures. MediGold may also make disclosures for judicial and administrative proceedings such as lawsuits or other disputes in response to a court order. MediGold will disclose your medical information to government agencies concerning victims of abuse, neglect or domestic violence. MediGold will report drug diversion and information related to fraudulent prescription activity to law enforcement and regulatory agencies. Specialized government functions will include military and veteran's activities, national security and intelligence activities, and protective services for the President and others. MediGold will make certain disclosures that are required in order to comply with workers' compensation or similar programs.

Public Health Oversight or Safety: MediGold will use and disclose PHI to avert a serious threat to health and safety of a person or the public. MediGold will use and disclose PHI to Public Health Agencies for immunizations, communicable diseases, etc. MediGold will use and disclose PHI for activities related to the quality, safety or effectiveness of FDA-regulated products or activities, including collecting and reporting adverse events, tracking and facilitating product recalls, etc. and post-marketing surveillance.

Health Information Exchange (HIE): Your PHI may be disclosed to an approved health information exchange ("HIE") to facilitate the provision of health care to you. The HIE has a duty under the law to maintain appropriate administrative, physical and technical safeguards to protect the privacy and security of PHI. Only authorized individuals may access and use PHI from the HIE. You or your personal representative have the right to request in writing that MediGold do either or both of the following: (i) not disclose any of the your PHI to the HIE; and (ii) not disclose specific categories of your PHI to the HIE. Any restrictions on the disclosure of PHI you request as described in the prior sentence may result in a health care provider not having access to information that is necessary for the provider to render appropriate care to you. MediGold will honor all requests for restrictions on disclosure of PHI to health information exchange(s) as required by law. For more information or to request restrictions, please contact Member Services by mail to 6150 East Broad Street, Suite EE320, Columbus, OH 43213, or by calling Member Services at 1-800-240-3851 (TTY/TDD 711), 8 a.m.-8 p.m., 7 days a week.

USE OR DISCLOSURE REQUIRING YOUR AUTHORIZATION

Marketing: MediGold is not permitted to provide your PHI to any other person or company for marketing to you of any products or services other than certain MediGold's products or services unless you have signed an authorization. If MediGold receives direct or indirect payment from or on behalf of a third party to make a communication that encourages you to purchase or use that third party's product or service we will obtain your authorization.

Psychotherapy Notes, Sale of PHI, and Other Uses: In addition to marketing and research, the following uses and disclosures will be made only with your authorization: (i) most uses and disclosures of psychotherapy notes (if recorded by a mental health professional); and (ii) disclosures that constitute a sale of PHI. MediGold does not share or sell your PHI to companies that market health care products or services directly to consumers for use by those companies to contact you, such as drug companies, unless you have signed an authorization.

Other uses and disclosures of your medical information not described in this Notice will be made only with your written authorization. Written authorizations will let you know why we are using your PHI. You have the right to revoke an authorization at any time. If you have questions regarding authorizations, please call

Member Services.

INDIVIDUAL RIGHTS

Under the federal privacy regulations, you have the following rights regarding your personal health information. You can exercise these rights as described below by contacting MediGold, either by mail to 6150 East Broad Street, Suite EE320, Columbus, OH 43213, or by calling Member Services at 1-800-240-3851 (TTY/TDD 711), 8 a.m.-8 p.m., 7 days a week.

Right to Confidential Communications: You have the right to request in writing to receive confidential communications of your PHI by alternative means or at alternative locations. For example, you may request that MediGold only contact you at work or by mail.

Right to Request Restrictions: You have the right to request restrictions on certain uses and disclosures of your PHI. MediGold will consider your request, but is not required to agree to your requested restrictions.

Right to Inspect and Copy: With some exceptions you have the right to inspect and copy information about your PHI as long as we maintain the information. In certain limited circumstances, MediGold may be required to deny your request.

Right to Amend: With some exceptions you have the right to request in writing an amendment of your PHI for as long as MediGold maintains the information.

Right to an Accounting: With some exceptions you have a right to receive an accounting of certain disclosures of your PHI that MediGold has made.

Right to Receive a Copy of this Notice: You have the right to receive a paper copy of this Notice of Privacy Practices upon request.

Right to Notification of Breach. You will receive notification of any breach of your unsecured PHI.

COMPLAINTS

If you believe your privacy rights have been violated, you may file a complaint with MediGold. You may submit complaints directly to MediGold, either by mail to 6150 East Broad Street, Suite EE320, Columbus, OH 43213, or by calling Member Services at 1-800-240-3851 (TTY/TDD 711), 8 a.m.-8 p.m., 7 days a week. ***MediGold assures you that filing a complaint will in no way affect your covered services or membership in our plan – we will not retaliate against you for filing a complaint.*** Complaints may also be filed with the Department of Health and Human Services, Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting www.hhs.gov/ocr/privacy/hipaa/complaints/.

FURTHER INFORMATION

To obtain additional information, please contact Member Services at toll-free at 1-800- 240-3851 (TTY 711). Member Services is available 8 a.m.-8 p.m., 7 days a week.

CHANGES TO THIS NOTICE

MediGold will abide by the terms of the notice currently in effect. MediGold reserves the right to change the terms of its notice and to make the new notice provisions effective for all PHI that it maintains. We will notify you in writing of any substantial changes to the notice. Our current Notice of Privacy Practices is available on our website at MediGold.com.²

² Coverage may be underwritten or administered by one or more of the following companies: Mount Carmel Health Plan, Inc.; Mount Carmel Health Insurance Company; and Mount Carmel Health Plan of Idaho, Inc.