

## **CALDWELL COLLEGE EMPLOYEE WELFARE BENEFIT PLAN**

### **PRIVACY PRACTICES FOR PROTECTED HEALTH INFORMATION (“PHI”)**

#### **UNIFORM AMENDMENT TO SUMMARY PLAN DESCRIPTIONS**

Caldwell College is a sponsor of the Caldwell College Employee Welfare Benefit Plan (the “Plan”). For the purposes of this statement, the Plan collectively includes the individual medical, dental, and prescription drug plans that are currently sponsored by Caldwell College. Caldwell College and the Plan are committed to protecting confidential and Protected Health Information (“PHI”) it collects from you or receives about you. Any insurance companies utilized by Caldwell College or the Plan to maintain the Plan are required by law to maintain the privacy of your PHI, as are Caldwell College and the Plan.

The Plan is required by law to take reasonable steps to ensure the privacy of your PHI and to inform you about:

- The Plan’s uses and disclosures of PHI
- Your privacy rights with respect to PHI
- The Plan’s duties with respect to PHI
- The person or office to contact for further information about the Plan’s privacy practices.

This statement is applicable to the medical and dental components of the Plan and their respective summary plan descriptions.

#### **Protected Health Information (“PHI”)**

PHI is information that relates to an individual’s health, healthcare, treatment, or payment for healthcare that identifies the individual. Identification may be by name, social security number or similar information that relates to a specific individual. Information relating to your past health, present health, treatment, diagnosis or conditions is considered to be PHI.

#### **Uses and Disclosures**

##### **Uses for which Consent is Not Required**

The Plan uses and discloses PHI for the purposes of paying claims and healthcare operations. This means that this Plan may disclose PHI to the extent necessary to maintain the Plan and that are necessary for it to continue as a source of welfare benefits. Examples of such disclosures include the release of information for eligibility verification, disclosure of past claims information for the purposes of obtaining new or different coverage or stop-loss coverage, and disclosure of information when auditing claims and reviewing claims payment decisions when an appeal is filed.

The Plan may also disclose PHI when required by law. These disclosures include federal, state and other health oversight committees, public health activities and emergencies, judicial and administrative proceedings, law enforcement officials with a warrant or subpoena, provision of information to coroners and medical examiners and disclosures for government health data systems as required by governmental entities.

In all instances of use or disclosure of PHI, Caldwell College will make all reasonable efforts not to use or disclose any more than the minimum amount of PHI necessary to accomplish the intended purpose of the use or disclosure, taking into consideration practical and technological limitations.

#### *Disclosures Requiring Written Consent*

Your written authorization generally will be obtained before the Plan will use or disclose psychotherapy notes about you from your psychotherapist. Psychotherapy notes are separately filed notes about your conversation with your mental health professional during a counseling session. They do not include summary information about your mental health treatment. The Plan may use and disclose such notes when needed by the Plan to defend against litigation filed by you.

#### *Disclosures Requiring You to Agree or Disagree to Release*

Disclosures of 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.

#### *Individual Rights*

As a participant in the Plan, you have certain rights with respect to your PHI.

- You have the right to access your own PHI as maintained by the Plan, including a right to inspect and copy that information.
- You have the right to request amendment or correction of PHI if that information is inaccurate or incomplete.
- You have the right to receive confidential communications of PHI should you request that information from the Plan.
- You have the right to receive an accounting of instances when PHI has been disclosed for purposes other than treatment, payment or healthcare operations.
- You have the right to obtain a copy of this Notice and a copy of the Privacy Policy from the Plan if you request them, including a paper copy of this Notice if

- it was received electronically.
- You have the right to request that the Plan restrict uses and disclosures of PHI. However, the Plan is not required to agree with a requested restriction.

### **The Plan's Obligations**

The Plan will take every reasonable step to ensure that any subcontractors or agents who may receive PHI agree to the same restrictions as are placed on Caldwell College or the Plan. Caldwell College, as the employer, shall report to the Plan instances of use or disclosure of PHI that is inconsistent with the privacy regulations.

The Plan shall make PHI available to individuals, and shall permit individuals to amend their PHI when requested. The Plan will also provide the individual with an accounting of any instances where the individual's PHI has been disclosed by the Plan for any reason other than for payment of claims or operation of the Plan coverage.

Caldwell College agrees to return to the Plan any PHI received when it is no longer needed, or such information shall be destroyed by it, if feasible. Caldwell College shall also make sure that adequate separation has been established between the Plan and employees of Caldwell College to prevent inadvertent disclosure of PHI. Caldwell College further warrants that it will not use or disclose PHI for employment related actions.

This Notice does not apply to information that has been de-identified. De-identified information is that 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 Plan may use or disclose "summary health information" to Caldwell College, for obtaining premium bids or modifying, amending or terminating group health plans. Summary health information is that which summarizes the claims history or claims experience of the group that has been otherwise de-identified.

The Plan reserves the right to amend or change its privacy practices at any time and to apply the change to any PHI received prior to the date of the amendment. If a privacy practice is materially changed, a revised version of this Notice will be provided to all participants and beneficiaries for whom the Plan maintains PHI. Any revised version of this Notice will be issued within sixty (60) days of the effective date of any material change to the privacy practices.

### **Your Right to File A Complaint**

If you believe that your privacy rights have been violated, you may complain to the Plan in care of the following: Director of Human Resources, Privacy Official, Caldwell College, 9 Ryerson Avenue, Caldwell, New Jersey 07006, (973) 618-3341. 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, DC 20201.

The Plan will not retaliate against you for filing a complaint.

**Whom to Contact for More Information**

If you have any questions regarding this Notice or the subjects addressed in it, you may contact the following officer: Director of Human Resources, Privacy Official, Caldwell College, 9 Ryerson Avenue, Caldwell, New Jersey 07006, (973) 618-3341.

**Statement with Regard to Insurance Certificates**

Caldwell College utilizes the service of insurance companies to provide uniform certificates of insurance describing the rights, obligations and options for participants in the Plan. To the extent these certificates of insurance as provided by the insurance companies are missing this provision, or a similar provision regarding privacy of participant health information, this statement is intended as a supplement to the summary plan description and certificate of insurance of the Plan.