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.

► Available documents

Privacy Statement
Your member handbook includes a Privacy Statement. That statement offers details about your rights. Those rights regard the privacy of protected health information (PHI). UPMC for You protects PHI for its members. UPMC for You also does that for individuals who were previously members and individuals who want to become members.

Notice of Privacy Practices
The document you are reading is a Notice of Privacy Practices. UPMC for You gives this to you so that you know how your PHI may be used or disclosed. By law, UPMC for You must protect your health information. UPMC for You must also send you this notice. You have rights related to PHI. This notice describes those rights.

UPMC for You also has rights. One of those rights is to change its privacy practices. UPMC for You can also change the notice. If UPMC for You makes a material change to its practices, UPMC for You will:

- Notify you about the change.
- Post the new notice on the UPMC Health Plan website.
- Provide you with a copy electronically or through the mail.

UPMC for You may apply revised practices to existing and new PHI.

► Words to know

UPMC for You will use these terms:

- Protected Health Information
- Protected Health Information (PHI)
- PHI
- Health information
- Information

Those words refer to information that is collected, created, maintained, or transmitted about you. It may identify you. It may relate to past, present, or future health and behavioral health services. It may also describe payments for such services.
How UPMC for You uses and discloses your protected health information

UPMC for You collects, uses, and discloses your information to administer benefits and provide services to its members. UPMC for You has the right to use or disclose your information for payment, treatment and healthcare operations. UPMC for You has listed some examples. You may want to see the full lists, (45 C.F.R. § 164.501). UPMC for You will not use or disclose any of your genetic information for any of these functions.

Payment
- Determining your coverage.
- Processing service claims.
- Determining medical necessity.
- Issuing an explanation of your benefits.
- Pre-authorizing services.
- Determining whether a service is covered.
- Health coverage eligibility
- Payment for health services
- Payments due from members

Health care operations
- Credentialing health care providers
- Peer review
- Business management
- Accreditation and licensing
- Utilization review
- Quality improvement
- Enrollment
- Underwriting
- Reinsurance
- Compliance
- Auditing
- Rating
- Other functions relating to your plan

Treatment
- Disease management
- Wellness programs
- Coordinating benefits.
- Referrals and consultations
Other uses and disclosures
Some activities do not fit the above lists. Examples include:

Business Associates. UPMC for You has business partners. They are called business associates. Business associates must also protect your PHI. They use your information only as spelled out in UPMC for You’s contract with them.

Other Covered Entities. UPMC for You may use or disclose your information to healthcare providers to help them treat you or to receive payment. UPMC for You may also disclose your information to other covered entities to help them with their healthcare operations.

Required by Law. UPMC for You may disclose your information to any Federal or State agency to show its compliance with HIPAA. If an agency asks, UPMC for You must share your records with them. The U.S. Department of Health and Human Services is one agency that may ask for records.

Public Health. UPMC for You may share PHI with a county health department. This would happen if they ask for data regarding a serious illness.

Abuse or Neglect. UPMC for You may share your PHI with government authorities. Those authorities include social services or protective services. By law, UPMC for You must provide information to them.

Health Oversight. UPMC for You may share your PHI for legally permitted activities. These activities include:
- Licensure
- Government audits
- Fraud and abuse investigation
- Accreditation

Legal Proceedings. UPMC for You may disclose your information in response to a court order, subpoena, or search order.

Law Enforcement. UPMC for You may share limited PHI with the police and other law enforcement agencies. It would be used to help locate a missing person, report a crime, or other similar reasons.

Coroners and Funeral Directors. UPMC for You may share PHI with a coroner or medical examiner. It would be used to identify someone who died, determine a cause of death, or as required by law. UPMC for You may also share information with a funeral director for burial purposes.

For Purposes of Organ Donation. UPMC for You shares PHI to meet a member’s wishes for organ donation.

Research. UPMC for You may use or disclose your PHI for research. The research would be related to the study of diseases or disabilities. This would happen only if the study meets privacy law requirements.
Serious Threat to Health or Safety. UPMC for You may share your PHI to avoid a serious threat to you, another person, or the public. Your information would be given to health agencies, the police, or other law enforcement agencies. UPMC for You may also share PHI if there is an emergency or natural disaster.

Specialized Government Functions. UPMC for You may share your PHI if there is a national crisis. UPMC for You may also do this to help protect the President of the United States and other officials. The disclosure would result from a government request.

Workers’ Compensation. UPMC for You may share PHI relevant to job-related injuries or illnesses. That would only happen for workers’ compensation coverage under state law.

Correctional Institutes or Law Enforcement Officials. If you are in jail or in law enforcement custody, UPMC for You may share your PHI. This would happen only if it is needed to:

- Provide you with health care.
- Protect your health and safety.
- Protect the health and safety of others.
- Keep the facility you are in safe.

Data Breach. UPMC for You may use your contact information to provide notices required by law. These notices can include unauthorized acquisition, access, or disclosure of your PHI. UPMC for You may provide this notification directly to you. Or, it may be given to the employer or group that sponsors your health coverage.

Authorized use
Except as described in this notice, UPMC for You will use or disclose your PHI only if you provide authorization to do so in writing. Psychotherapy notes, health plan marketing, and sale of your information are some situations that would require your authorization. If you provide authorization to share your PHI, UPMC for You cannot guarantee that the person receiving the PHI will not disclose it. You may revoke your authorization at any time, unless UPMC for You has already acted on it.

Required disclosures
UPMC for You is required to share your PHI:

- To you or someone who has the legal right to act on your behalf (your personal representative). This is done in order to administer your rights as described in this notice.
- To the Secretary of the Department of Health and Human Services, if necessary, to ensure that your privacy is protected.
►Individual rights

You should be especially aware of several important rights that all health plans and providers involved in your care must honor. They are shown in the list below. Your request to exercise these rights must be in writing and signed by you or your representative. UPMC for You has developed forms to help you. These forms are available on-line at www.upmchealthplan.com, or you can call the UPMC for You Member Services Department to have a form(s) mailed to you. Member Services representatives are available Monday, Tuesday, Thursday, Friday from 7 a.m. to 7 p.m., Wednesday from 7 a.m. to 8 p.m., and Saturday from 8 a.m. to 3 p.m. Call the phone number listed on your member identification card or see the chart below.

The rights are described below.

Restrictions
You have the right to ask UPMC for You to restrict how your information is used or disclosed for payment, treatment, and health care operations. UPMC for You does not have to approve your request. However, UPMC for You will consider all reasonable requests. UPMC for You has the right to end restrictions that were approved. You will be notified if UPMC for You approves a restriction then reverses that approval. You have the right to end – orally or in writing – any restriction by contacting the UPMC Health Plan Compliance Office at 1-877-574-5517.

Confidential communications
You have the right to ask UPMC for You to send you information in a confidential way. You may want information in a different way than is typical. You may want information sent to a different address. If our standard approach could cause harm, UPMC for You will consider reasonable requests to take a different approach.

Copies of your information
You have a right to ask to review or copy your records. UPMC for You does not have medical records. UPMC for You has the following:

- Claims for payment from health care providers
- Enrollment data
- Member Services logs of your calls
- Medical review to approve services
- Complaints or grievances you filed

Records can be on paper or in electronic form. Electronic records can be sent to you through a computer. Records can be sent to you or your representative. There may be fees.

UPMC for You may deny your request for records. That usually does not happen. If it does happen, you can ask to have the denial reviewed.

Amending information
You have the right to ask to change information in your records. This happens when something is wrong or incomplete. You have to tell UPMC for You why you are asking for a change. Your request may be denied. If so, you can put a statement in your file. The statement will show why you disagree with the denial.
Accounting of disclosures
You have the right to ask UPMC for You to tell you how your PHI was disclosed. When you ask, tell UPMC for You the time period you want to review. UPMC for You will not go back more than six years. Your right does not include disclosures related to:

- Payment
- Treatment
- Health care operations
- Information you requested

Copies of this notice
You can ask for a copy of this notice. If you already have an electronic copy, you can ask for a paper copy. You can also find the notice on-line at www.upmchealthplan.com. Click on Individuals & Families. Then select Medical Assistance and click on member information.

►Using your rights
Contact us. A Member Services representative will answer any questions about using your rights.

Or, write to us here:
Privacy Officer
UPMC Health Plan
600 Grant Street
Pittsburgh, PA 15219

►Filing a complaint
If you believe your privacy rights have been violated, you may file a complaint with UPMC for You by sending your written complaint to the address below. You may also notify the Secretary of the U.S. Department of Health and Human Services at 200 Independence Avenue, S.W., Washington, D.C. 20201. UPMC for You will not take any action against you for filing a complaint.

Write down your complaint and send it to us at:
Privacy Officer
UPMC Health Plan
600 Grant Street
Pittsburgh, PA 15219

Effective Date
Originally issued in April 14, 2003, this Notice is revised and effective as of September 23, 2013.
# Which number do I call?

<table>
<thead>
<tr>
<th>If you live in one of these counties:</th>
<th>You are located in this zone:</th>
<th>Call Member Services at this phone number:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allegheny, Armstrong, Beaver, Bedford, Blair, Butler, Cambria, Fayette, Greene, Indiana, Lawrence, Somerset, Washington, and Westmoreland</td>
<td>Southwest Zone</td>
<td>1-800-286-4242</td>
</tr>
<tr>
<td>Adams, Berks, Cumberland, Dauphin, Fulton, Franklin, Huntingdon, Lancaster, Lebanon, Lehigh, Northampton, Perry, and York</td>
<td>Lehigh Capital Zone</td>
<td>1-866-353-4345</td>
</tr>
<tr>
<td>Cameron, Clarion, Clearfield, Crawford, Elk, Erie, Forest, Jefferson, Mercer, McKean, Potter, Venango, Warren</td>
<td>New West Zone</td>
<td>1-855-425-8762</td>
</tr>
<tr>
<td>Any of the above counties</td>
<td>Any zone</td>
<td>Toll-free TTY Number 1-800-361-2629</td>
</tr>
</tbody>
</table>

Translation services are available by calling UPMC for You at 1-800-286-4242 for Southwest, 1-866-353-4345 for Lehigh Capital (Lehigh Valley and Capital Region), or 1-855-425-8762 for New West. Toll-free TTY # 1-800-361-2629.

UPMC for You为您提供翻译服务，如有需要请拨打1-800-286-4242西南部（西南部），1-866-353-4345Lehigh Capital（里海/首府），1-855-425-8762新西部（新西部）。电传打字机TTY用户请拨打电话1-800-361-2629。

The information in notice is also available in large print.

Call 1-800-286-4242. Toll-free TTY # 1-800-361-2629.