



PRIVACY NOTICE OF EMPLOYEE BENEFITS ADVANTAGE
EFFECTIVE MAY 1, 2005
REVISED SEPTEMBER 23, 2013

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.

We are required by law to maintain the privacy of your personal health information and to provide you with this notice of our privacy practices and legal duties. We are required to abide by the terms of this notice. We reserve the right to change the terms of this notice and to make any new provisions effective to all of the personal health information that we maintain about you. If we revise this notice, we will provide you with a revised notice by mail.

We collect nonpublic personal information about you from the following sources:

- Information that we obtain directly from you in conversations or on applications or other forms that you fill out;
- Information that we obtain as a result of your transactions with us or others;
- Information that we obtain from your medical records or from medical professionals;
- Information that we obtain from other entities, such as healthcare providers or other insurance companies, in order to service your policy or carry out other insurance-related needs.

Permissible Uses and Disclosures of Protected Information

- We may use or disclose your protected health information without your written permission to carry out certain limited activities relating to your Health Insurance benefits, including reviewing the competence or qualifications of healthcare professionals and conducting quality-assessment activities.
- We may share the information gathered with non-affiliated third parties as permitted or required by law. This may include but is not limited to shopping the renewal, placement, providing quotes and other insurance services we provide.

In situations permitted or required by law. We may also use or disclose your protected health information without your written permission for other purposes permitted or required by law, including the following:

- >> As authorized by and to the extent necessary to comply with Worker's Compensation or other no-fault laws.
- >> To a health oversight agency for activities including audits or civil, criminal, or administrative proceedings,
- >> To a public health authority for purposes of public health activities (such as to the Food and Drug Administration to report consumer product defects).
- >> To a law enforcement official for law enforcement purposes or in response to a court order or in the course of any judicial or administrative proceeding.
- >> To a government authority, including a social service or protective services agency, authorized to receive reports of abuse, neglect, or domestic violence.

We are required by law to maintain the privacy of protected health information, to provide notice of our legal duties and privacy practices with respect to protected health information, and to notify affected individuals following a breach of unsecured protected health information.

Statement of Your Rights

You have a right to know how we may use or disclose your personal health information. This notice informs you of those uses and disclosures. There are certain uses and disclosures of your personal health information that we are permitted or required to make by law without your permission. For all other uses and disclosures, we must first obtain your permission. In addition, you have the following rights;

- The right to request that we place additional restrictions on our uses and disclosures of your personal health information. However, we are not obligated to agree to impose any such additional restrictions.
- The right to access, inspect, and copy the protected information pertaining to you that we maintain in our files about you, and the right to have us correct or amend any information that we create in error. Requests to access or amend your health information should be sent to the contact person and address provided.

Access to and Correction of Your Personal Information

You can review the personal information we collect about you. Upon proper request, we will inform you of the nature and substance of the recorded personal information, the identity of any institutional source from which we obtained the information, and the identity of any persons to whom we have disclosed such information with 2 years prior to your request. You may recommend changes to your personal information you believe in error by submitting a written request that credibly shows the error. If you believe that your personal information is being used for a purpose other than what was intended when submitted, you may contact us. In all cases, we will take reasonable steps to verify your identity before granting access or making corrections.

To obtain access to your information. You should submit a request in writing to the contact person below. The request should include your name address, social security number, telephone number and the recorded information you would like to access. Your request should also state how you would like to access the information – in person or by having a copy mailed to you. A form to request access to your health information can be obtained by contacting the contact person below. Upon receipt of the request, you will be contacted within 30 business days to provide you the access requested.

For any purposes to which you have not objected. In certain limited circumstances, we may use or disclose your protected health information after we have given you an opportunity to object and you have not objected. For example, if you do not object, we may use limited information about you to notify family members or any other person identified by you regarding issues directly related to such person's involvement with your care or payment for that care, or in emergency circumstances.

For purposes for which we have obtained your written permission. All other uses or disclosures of your protected health information will be made only with your written permission, and any permission that you give us may be revoked by you at any time.

Complaints About Misuse of Health Information. You may complain either directly to us or to the Secretary of Health and Human Services if you believe your rights with respect to our protection of your health information have been violated. A written complaint submitted to us should include as many details (such as names and dates) as possible. You will not be retaliated against in any way for filing a complaint.

Marketing and Fundraising. We will not sell your information to third parties, such as retailers, direct marketers or publishers, for their use for solicitation lists. We will not contact you regarding fundraising activities.

Our Practices Regarding Confidentiality and Security. We restrict access to nonpublic personal information about you to those employees who need to know that information in order to provide products or services to you. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your nonpublic personal information.

Our Policy Regarding Dispute Resolution. Any controversy or claim arising out of or relating to our privacy policy, or the breach, thereof shall be settled by arbitration in accordance with the rules of the American Arbitration Association, and judgment upon the award rendered by the arbitrator(s) may be entered in any court having jurisdiction thereof.

Contact Person for Filing Complaint or Obtaining Further Information.

Tina McClary
Privacy Officer
Employee Benefits Advantage
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918-459-2500
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