

**Important Notice About Your Medical Data Privacy
from the
Heat and Frost Insulators Local 34 Health and Welfare Plan**

Please read this notice carefully and keep it where you can find it. This notice has information about your medical data privacy with Heat and Frost Insulators Local 34 Health and Welfare Plan (the “Plan”) and explains how it protects certain types of highly confidential medical information, including records related to substance use disorder treatment records.

The SPD has been amended to address the Plan’s obligations under 42 C.F.R. Part 2 regarding substance use disorder treatment records. The Privacy Notice, which is found in Plan’s SPD, will now provide as follows:

MEDICAL DATA PRIVACY

Introduction

The federal Department of Health and Human Services adopted regulations governing the Plan’s use and disclosure of your health information. The regulations arose from the Health Insurance Portability and Accountability Act of 1996 (HIPAA). While the Plan has always taken care to protect the privacy of your health information, the new regulations require the Plan to adopt more formal procedures and to tell you about these procedures in this booklet. The information below discusses ways in which the Plan uses and discloses your health information.

Under HIPAA, the Plan is required by law to take reasonable steps to ensure the privacy of your personally identifiable health information and to tell you about:

The Plan’s uses and disclosures of Protected Health Information (PHI);

Your privacy rights with respect to your PHI;

The Plan’s duties with respect to your PHI;

Your right to file a complaint with the Plan and the Secretary of the U.S. Department of Health and Human Services; and

The person or office to contact for further information about the Plan’s privacy practices.

A. The Plan’s Use and Disclosure of PHI

The Plan will use Protected Health Information (PHI) to the extent of and according to the uses and disclosures allowed by the Medical Data Privacy Regulations (Privacy Regulations) adopted under HIPAA, including for purposes related to *Health Care Treatment, Payment, and Health Care Operations*.

The Plan will enter into agreements with other entities known as Business Associates to perform some of these functions on behalf of the Plan. Each Business Associate will be allowed to use and disclose only the minimum amount of PHI needed to perform the Business Associate’s duties on behalf of the Plan. The Plan’s agreements with its Business Associates will also meet the other requirements of the Privacy Regulations.

Use of PHI for Treatment Purposes

Treatment includes the activities relating to providing, coordinating or managing health care and related services. It also includes but is not limited to consultations and referrals between one or more of your providers. As a health plan, the Plan is generally not involved in treatment situations but may, from time-to-time, release PHI to assist providers in your treatment.

Use of PHI for Payment and Health Care Operations

Payment includes the Plan's activities to obtain premiums, contributions, self-payment, and other payments to determine or fulfill the Plan's responsibility for coverage and providing benefits under the Plan. It also includes the Plan obtaining reimbursement or providing reimbursement for providing health care that has been provided. These activities include but are not limited to the following:

1. Determining eligibility or coverage under the Plan;
2. Adjudicating claims for benefits (including claim appeals and other benefit payment disputes);
3. Subrogation;
4. Coordination of Benefits;
5. Establishing self-payments by persons covered under the Plan;
6. Billing and collection activities;
7. Claims management and related health care data processing, including auditing payments, investigating and resolving payment disputes and responding to covered persons' inquiries about payments;
8. Obtaining payment under stop-loss or similar reinsurance;
9. Reviewing whether claims are payable under the Plan, including whether they are Medically Necessary, Reasonable and Customary, or otherwise payable;
10. Reviewing coverage under the Plan, appropriateness of care, or justification of charges;
11. Utilization review, including precertification, preauthorization, concurrent review and retrospective reviews;
12. Disclosing to consumer reporting agencies certain information related to collecting contributions or reimbursement (the information that may be released is: name and address, date of birth, Social Security number, payment history, account number and name and address of the provider and/or health plan); and
13. Reimbursement to the plan.

Health Care Operations can include any of the following activities. While the Plan does not currently use or release PHI for all these activities, it may do so in the future to perform health care operations of the Plan:

1. Conducting quality assessment and improvement activities, including outcomes evaluation and development of clinical guidelines as long as general knowledge is not the primary purpose of these

studies; population-based activities relating to improving health or reducing health care costs, protocol development, case management and care coordination, contacting health care providers and patients with information about treatment alternatives; and related functions that do not include treatment;

2. Reviewing the competency or qualifications of health care professionals; evaluating provider performance; accreditation, certification, licensing or credentialing activities;
3. Underwriting, premium rating and other activities relating to creating, renewing or replacing a health insurance contract (or reinsurance) or health benefits under the Plan;
4. Conducting or arranging for medical review, legal services, and auditing functions, including fraud and abuse detection and compliance programs;
5. Planning and development, such as conducting cost-management and planning related analyses relating to managing and operating the Plan (including formulary development and administration, development, or improvement of methods of payment or coverage policies); and
6. Management and general administrative activities of the Plan, including but not limited to:
 - a. Managing activities related to implementing and complying with the Privacy Regulations;
 - b. Resolving claim appeals and other internal grievances;
 - c. Merging or consolidating the Plan with another Plan, including related due diligence; and
 - d. As permitted under the Privacy Regulations, creating de-identified health information or a limited data set.

B. Other Uses and Disclosures of PHI

The Privacy Regulations permit certain other uses and disclosures of your PHI. These include, for example, releasing PHI to personal representatives of deceased covered persons, releasing PHI for public health activities, releasing PHI for court proceedings, and releasing PHI for law enforcement and similar purposes. If the Plan releases PHI in any of these other permitted situations, it will do so according to the requirements of the Privacy Regulations.

The Privacy Regulations also permit the Plan to release PHI if it receives a valid authorization from you. If the Plan receives a valid authorization, the Plan will disclose PHI to the person or organization you authorize to receive the information. This may include, for example, releasing information to your spouse, to the pension plan, other retirement plans, vacation plan or similar plan for the purposes related to administering those plans.

C. *Uses and Disclosures of Substance Use Disorder Treatment Records*

The Plan may receive, maintain, or disclose records that identify you as having a substance use disorder, being diagnosed with a substance use disorder, or receiving substance use disorder treatment from a federally assisted substance use disorder program. These records are protected by federal law and receive greater confidentiality protections than other health information, pursuant to 42 C.F.R. Part 2 (“Part 2”).

The Plan will not use or disclose substance use disorder treatment records unless:

- You provide a written authorization that meets the requirements of Part 2;
- The use or disclosure is required or permitted by Part 2 (for example, in a medical emergency, for scientific research, for audit or evaluation activities, to report certain crimes occurring on program premises, or pursuant to a valid court order); or
- The information has been fully de-identified in accordance with Part 2.

Part 2 records (or testimony about their contents) may not be used or disclosed in any civil, criminal, administrative, or legislative proceeding against you unless based on your specific written consent or pursuant to a court order that complies with Part 2.

Any substance use disorder treatment records disclosed by the Plan discloses with your written authorization will be subject to federal redisclosure restrictions. The recipient of the information is prohibited from further disclosing it unless permitted by Part 2 or authorized by you in writing.

The Plan will maintain appropriate safeguards to protect the confidentiality of substance use disorder records, including any segregation, labeling, access restrictions, or redisclosure limitations required by Part 2.

D. Release of PHI to the Board of Trustees

The Plan will disclose PHI to the Board of Trustees, which is considered the Plan Sponsor under the Privacy Regulations. The Plan has received a certificate from the Board of Trustees that the plan documents, including this Summary Plan Description, have been amended to incorporate the following provisions.

The Board of Trustees will receive and use PHI only for the Plan administration functions that the Trustees perform for the Plan. In addition, the Trustees will:

1. Not use or further disclose PHI other than as permitted or required by the Summary Plan Description or as required by law.
2. Ensure that any agents, including subcontractors, to whom the Board of Trustees provides PHI received from the Plan, agree to the same restrictions and conditions that apply to the Board of Trustees with respect to such PHI;
3. Not use or disclose PHI for employment-related actions and decisions unless authorized by the person who is the subject of the PHI;
4. Not use or disclose PHI in connection with any other benefit or employee benefit plan of the Plan Sponsor unless authorized by the person who is the subject of the information;
5. Report to the Plan any PHI use or disclosure that is inconsistent with the allowed uses or disclosures of which it becomes aware;
6. Make PHI available to a person who is the subject of the information according to the Privacy Regulations' requirements;
7. Make PHI available for amendment and incorporate any amendments to PHI according to the requirements of the Privacy Regulations;
8. Make available the PHI required to provide an accounting of disclosures;

9. Make internal practices, books, and records relating to the use and disclosure of PHI received from the Plan available to the Secretary of Health and Human Services for the purposes of determining the Plan's compliance with the Privacy Regulations; and
10. If feasible, return or destroy all PHI received from the Plan that the Trustees maintain in any form, and retain no copies of the PHI when no longer needed for the purpose for which disclosure was made (or if return or destruction is not feasible, limit further uses and disclosures to those purposes that make the return or destruction infeasible).

E. Trustee Access to PHI for Plan Administration Functions

As required under the Privacy Regulations, the Plan will give access to PHI to the Board of Trustees, and the Trustees will be able to use PHI, for purposes of hearing and determining claim appeals; making other determinations concerning claims payments; assisting covered persons with eligibility and benefit issues; Plan benefit design; amending, modifying, and terminating the Plan; and Plan management issues.

F. Noncompliance Issues

If the persons described above do not comply with this Summary Plan Description, the Board of Trustees will provide a mechanism for resolving issues of noncompliance, including disciplinary sanctions.

G. Plan's Privacy Officer and Contact Person

As required by the Privacy Regulations, the Plan has named a Privacy Officer to oversee the Plan's compliance with the Privacy Regulations. The Plan has also named a Contact Person to help answer your questions concerning the Privacy Regulations and your PHI. You can also call the Contact Person if you have any complaints concerning the use or disclosure of your PHI. If you have any questions or complaints concerning your PHI, please contact the Plan Administrator and ask to speak with the Plan's Contact Person.