

# NOTICE OF PRIVACY PRACTICES

Effective May 1, 2010

This notice of privacy practices describes how HealthPartners and our related organizations<sup>1</sup> manage and protect your personal information. **This notice describes how we may use and disclose your health information and your other privacy rights. Please review it carefully.**

This notice is divided into three sections:

- ❑ An overview of our privacy practices;
- ❑ A more detailed description of our privacy practices and privacy rights for our health plan members; and
- ❑ A summary of how patients in our health care facilities can get information about those practices and rights.

## Section 1 - Summary Notice

We are required by law to maintain the privacy of your personal information and abide by the terms of this notice. We reserve the right to change the terms of this notice. If we materially change this notice and you are a health plan member, you will receive a new notice within 60 days of the change. If you are a patient, a current notice will be prominently displayed at our care delivery sites and given to you if you ask. Our privacy notice is also available at [healthpartners.com](http://healthpartners.com).

We use and disclose your personal information to help with your treatment, payment for your treatment and our health care operations, and in other ways permitted or required by law. When the law requires us to get your permission before we release your information to another organization or person, we do so as described in the more detailed portions of this notice.

You have several other rights related to your privacy. Those rights, and how you may exercise them, are described in the more detailed portions of this notice.

## Description of Health Plan Privacy Practices

This portion of our privacy notice describes how we, as a health plan, manage and protect members' and former members' personal information. It also describes how you, as a health plan member, may exercise your rights with regards to your personal information.

## Section 2

*If you are a self-insured member (that is, if your employer is self-insured), then Section 2 does not apply to you. Please check with your employer for more information about your health plan's privacy practices.*

## What Is "Personal Information?"

"Personal information" is information about you that relates to your past, present or future physical or mental health, payment for health care services, or the provision of health care services. Personal information includes information we receive from you

on applications and other forms, including demographic information such as your name, address and phone number, as well as your social security number, age, date of birth, dependents and health history. It also includes information that results from your doing business with us or our affiliates, such as enrollment, claims payment, prior approvals, referrals and coverage determinations.

## How Does HealthPartners Protect My Personal Information?

We permit access to your personal information by our staff and others only to the extent they need that information to administer your health plan, and benefits or to comply with legal or accreditation requirements. We maintain physical, electronic and administrative safeguards designed to protect your personal information and prevent unauthorized access.

## How Does HealthPartners Use My Personal Information?

We use your personal information only to the extent reasonably necessary to conduct or support treatment, payment or other health care operations, or as otherwise authorized by you or by law. Examples of how we use your personal information include:

- To coordinate your care;
- To pay claims for health care services provided to you;
- For health care operations, such as enrolling you and your dependents in a health plan;
- To support quality improvement.

## When Does HealthPartners Disclose My Personal Information?

We share your personal information - with our affiliates or with nonaffiliated parties - only to the extent reasonably necessary to conduct treatment, payment or health care operations, as required or permitted by law, or as otherwise authorized by you. **We never sell or rent your personal information to anyone.** Following are some examples of when and why HealthPartners discloses your personal information:

## Sharing with Affiliates

As your health plan, we may disclose your personal information to our affiliates (also known as related organizations) that help us administer and manage our health plans. When we share your information with our affiliates, it is because we have an arrangement with them to conduct certain treatment, payment or health care operations on our behalf.

## Sharing with Nonaffiliated Parties

As your health plan, we may share your personal information with nonaffiliated (non-related) third parties with whom we contract to administer or provide selected functions on behalf of our health plan. These contracts include assurances that safeguard your personal information. Some of the functions that nonaffiliated third parties perform on our behalf include care management services and certain payment activities.

The HealthPartners family ("we") currently includes these affiliate organizations: HealthPartners, Inc.; Group Health Plan, Inc.; Central Minnesota Group Health, Inc. (d/b/a HealthPartners Central Minnesota Clinics); HealthPartners Insurance Company; HealthPartners Services, Inc. (d/b/a RiverWay Clinics); Regions Hospital; Ramsey Integrated Health Services; RHSC, Inc.; HealthPartners Associates, Inc. (d/b/a North Suburban Family Physicians); Westfields Hospital; Hudson Hospital; Physicians Neck and Back Clinics; Western Wisconsin Emergency Medical Services; and North St. Paul Transitional Care Center. This list of affiliates may change from time to time.

### ***When Does HealthPartners Use or Disclose My Personal Information Based on Authorization?***

There may be times when we, as your health plan, use or disclose your personal information in a way that is not considered treatment, payment or health care operations or is not required or permitted by law. In those situations, we are required to get your specific written authorization to do so. For example, if someone contacts HealthPartners on your behalf, we may need you to sign a release of information before we can provide information to them. In some situations, your verbal authorization will allow us to talk with others on your behalf about a specific event or concern. For long-term arrangements, a written authorization will be required. If you do not wish to give your authorization for the proposed activity, you may do so with no fear of reprisal. You may revoke your authorization, in writing at any time, except if we have already relied upon it.

### ***HealthPartners' Other Uses and Disclosures of Personal Information.***

#### **Uses and Disclosures Required or Permitted by Law**

Because health plans are regulated by law and our activities often relate to public health, we may be required or permitted to disclose your personal information without obtaining your authorization. Examples of these kinds of disclosures include:

- To public authorities, for purposes such as tracking and controlling health care costs, certain diseases, injuries and other health conditions, as well as protecting public safety and national security;
- To report victims of abuse, neglect or other crimes;
- To health and health plan oversight agencies, such as the Minnesota Department of Health;
- In response to judicial, enforcement or administrative bodies, such as in response to search warrants or court orders;
- For research purposes, but only if the research study follows certain procedures to protect your privacy ;
- To medical examiners or coroners;
- For workers' compensation purposes.

#### **Uses and Disclosures about Plan Benefits or Services**

We may use or disclose your personal information to tell you about plan benefits, treatment alternatives, or health-related products and services; plan networks; plan-related products and services; appointment reminders; and reminders to obtain certain health services.

#### **Uses and Disclosures for Health Research**

The HealthPartners Research Foundation is a nonprofit organization within HealthPartners that conducts research to improve the health of our members, patients and the community. We may use your information to conduct health research in a number of ways, sometimes working with nonaffiliated research organizations. For more information on the HealthPartners Research Foundation, visit our website at [hprf.org](http://hprf.org).

#### **Uses and Disclosures for Market Research**

We sometimes conduct market research and surveys to help us design and improve our programs, communications and services to better meet our members' needs. While we never give your personal information to anyone for their own marketing purposes, on occasion we contract with nonaffiliated parties to perform market research activities on our behalf.

#### ***You Have Opt-Out Choices Regarding Information Disclosure***

If you prefer that we not disclose personal information about you, you may opt out of certain types of disclosures, described below.

- Market research conducted by nonaffiliated parties. If you opt out, we will not give your name or other personal information to nonaffiliated organizations to perform market research activities on our behalf. However, you may still be contacted by us directly, or you may be contacted by a nonaffiliated party if we are required by law or for accreditation purposes to conduct member satisfaction or quality surveys.
- Health research conducted by nonaffiliated parties. Opting out in this case means that we will not give your name or other personal information to nonaffiliated organizations for use in conducting health research. You may still be contacted by HealthPartners or an affiliate for research purposes, or by a non-affiliated party if we are so required by law.
- Participation in a record locator service such as the Minnesota Health Information Exchange (MN HIE). Record locator services like MN HIE allow your providers to locate your health history in order to provide you with treatment. If you opt out of a record locator service, your provider will not be able to use that service to locate the health records you have with us.

#### **How to Opt Out of Information Disclosure**

Although we strongly believe that sharing personal information for the limited purposes of market research, health research and record locator services leads to better health care and health care coverage for all, we want you to be comfortable with how we share your personal information. Therefore, if you do not want us to share your personal information with nonaffiliated parties for purposes of market research, health research, please complete and send us your opt-out form. The form can be found at [HealthPartners.com](http://HealthPartners.com) or by calling Member Services at 952-883-5000, toll-free at 800-883-2177, or 952-883-5127 (TTY). Your opt-out choices will be effective shortly after we receive your opt-out form. If you do not want to be included in the Minnesota Health Information Exchange (MNHIE) record locator service, please call the MNHIE service desk at 1-888-329-5270 or HealthPartners' Member Services at 952-883-5000, toll-free at 800-883-2177, or 952-883-5127 (TTY).

Your opt-out decisions will remain in effect until you notify us in writing that you wish to change these instructions.

#### ***What Are My Privacy Rights and How Do I Exercise Them?***

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State and federal laws give health plan members several rights that relate to the privacy of their personal information. Each of these rights is described below.

## *Description of Care Delivery Privacy Practices*

A more detailed description of privacy practices in our care facilities is provided at our hospitals and at clinic sites, or available upon request.

- **Right to Review and Copy Your Personal Information**  
We maintain a designated record set of members' information that helps us administer your health plan. You have the right to inspect and obtain a copy of your personal information that we maintain in the designated record set.
- **Right to Request an Amendment of Your Personal Information**  
You have the right to request an amendment (change) of your personal information in the designated record set. However, we are not required to agree to your requested change.
- **Right to Request a Restriction of Your Personal Information**  
You have the right to ask us not to use or disclose your personal information for certain purposes. However, we are not required to agree to your request.
- **Right to Request Confidential Communications**  
You have the right to ask us to communicate with you about confidential matters by alternative means or at alternative locations, and we will abide by your request if we can.
- **Right to Receive an Accounting of Disclosures**  
Subject to certain exceptions, you have the right to receive from us an accounting, or listing, of instances when we released your personal information to nonaffiliated third parties.
- **Right to Obtain a Copy of this Notice**  
You can request an additional copy of this notice by contacting Member Services. This notice is also available on our Web site at *healthpartners.com*.
- **Right to Complain about Our Privacy Practices.** If you believe we have violated your privacy rights, you may complain to us directly (see below) or to the Office for Civil Rights, United States Department of Health and Human Services, without fear of reprisal.

### *Whom should I call if I have other questions?*

We encourage you to contact us if you have any questions or concerns about this Notice of Privacy Practices or your privacy rights.

Call Member Services at 952-883-5000, toll free at 800-883-2177 or 952-883-5127 (TTY) or by writing to HealthPartners Member Services, PO Box 1309, Minneapolis, MN 55440-1309.

You may also contact our Privacy Officer at 1-866-444-3493.

### Section 3

The HealthPartners family ("we") currently includes these affiliate organizations: HealthPartners, Inc.; Group Health Plan, Inc.; Central Minnesota Group Health, Inc. (d/b/a HealthPartners Central Minnesota Clinics); HealthPartners Insurance Company; HealthPartners Services, Inc. (d/b/a RiverWay Clinics); Regions Hospital; Ramsey Integrated Health Services; RHSC, Inc.; HealthPartners Associates, Inc. (d/b/a North Suburban Family Physicians); Westfields Hospital; Hudson Hospital; Physicians Neck and Back Clinics; Western Wisconsin Emergency Medical Services; and North St. Paul Transitional Care Center. This list of affiliates may change from time to time.