

INTEGRA MANAGED CARE

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.

PLEASE CONTACT INTEGRA'S MEMBER SERVICES DEPARTMENT AT 1-877-388-5195 OR 711 (TTY) IF YOU HAVE ANY QUESTIONS.

You have the right to receive a paper copy of this Notice of Privacy Practices at any time. You may request a paper copy even if you have previously received one, or received this Notice of Privacy Practices electronically. You may also print out a copy of this Notice of Privacy Practices by going to the Integra website at www.integramanagedcare.com.

Integra is required to protect the privacy of your medical and personal information. Your medical and personal information is obtained in the course of providing services to you. This includes information such as your medical records, visits to your providers and information related to the payment of claims. Integra is required to give you this notice about how Integra uses (“discloses”) your medical and personal information. Integra will not disclose any medical or personal information unless such disclosure is allowed or required by law, or you provide us with a written authorization allowing us to disclose your medical or personal information. If after reading this Notice of Privacy Practices, you have additional questions you can call Integra at **1-877-388-5195 (TTY/TDD: 711)** or write to Integra at:

Member Services
Integra Managed Care
1981 Marcus Avenue, Suite 100
Lake Success, NY 11042

A. How Does Integra Use Your Personal and Medical Information

The law allows Integra to disclose medical and personal information ***without*** a signed authorization from you when we are using the information to provide you with health benefits. Integra staff and those organizations that we contract with in order to provide you with health benefits are required to comply with Integra’s requirements to protect the confidentiality of your medical and personal information.

As part of providing services to you, Integra may obtain personal, non-medical information about you such as your social security number, your address and your telephone number. Or, you may provide us with personal information when you contact Integra to ask a question or share a concern with us. Integra does not give out your personal information unless it is required or permitted by law. Unless you give us your permission, Integra will not give out your personal information for any purpose not related to your care.

Generally, Integra may use your medical information for payment, treatment, or healthcare operations. Below are some examples of what this means.

Payment: Your medical information may be disclosed for payment purposes. For example, when Integra determines your eligibility for a requested service, reimburses a provider that has treated you, or obtains payment from another insurance provider that is responsible for your coverage.

Treatment: Your medical information may be disclosed for treatment purposes. When you are seen by a provider in the Integra Provider Network, or are seen by any other provider, hospital, nursing home or facility, those entities may share information about you in order to coordinate your care and provide you with treatment. For example, your Integra Care Manager may discuss your care with one of your providers or with a hospital in order to coordinate your care. The provider and hospital may also share your medical information in order to coordinate your care and provide you with treatment.

Health Care Operations: Your medical information may be disclosed for purposes of health care operations. This includes things like care management, utilization review, and quality improvement activities. We may also use your medical information to evaluate our own performance, do internal audits of our activities, and resolve any grievances that you may have. Your medical information may also be used to communicate with other health plans and providers in performing quality assurance, reviewing the competence and qualifications of your providers and conducting fraud, abuse and compliance activities.

Integra may use your medical information for other uses including:

Business Associates: Integra may also use or disclose certain medical information to business associates who perform certain activities on our behalf. This might include an entity that manages vision or dental benefits, Integra's attorney and accountants, or any other business associate who needs information in order to complete work delegated by Integra.

Health Oversight Activities: Integra may also disclose certain medical information to a variety of government or regulatory authorities. For example, we may disclose your medical information to the Department of Health for purposes of an audit, investigation, disciplinary action, or legal action. We may also need to report your medical information for a public health purpose, such as reporting the outbreak of a disease. We are required to share your medical information with the Secretary of the United States Department of Health and Human Services when the Secretary investigates whether Integra is complying with the HIPAA Privacy Regulations.

People Involved with Your Care: Integra may share your medical information with a family member, other relative, close friend or other personal representative that you choose. This will be partly based upon how involved the person is with your care. We may share information with parents or guardians if allowed by law.

Law Enforcement: Integra may disclose your medical information if a law enforcement official asks us to. This may be done to help identify or locate a suspect or a missing person, or to provide information about the victim of a crime. We may also disclose your medical information if we

receive a subpoena, a discovery request, or other court or legal order. We may also disclose your medical information in order to avoid a serious threat to your health or safety.

Coroners, Medical Examiners, Funeral Directors and Organ Donation. Integra may disclose your medical information to identify a deceased person, determine a cause of death, or to help the coroner or medical examiner in other ways, as allowed by law. We may also share your medical information with funeral directors, as allowed by law. We may also share your medical information with organizations that handle organ, eye or tissue donations or transplants.

There are a variety of other reasons that we may use your personal or medical information, including:

- Contacting you to remind you of an appointment
- Contacting you to see if you are interested in a disease management program
- Contacting you about a change in your benefits

B. Rights Related to Your Medical Information

Integra may not use or disclose your personal or health information without your permission if it is not the type of disclosure listed in this notice. You have the following rights:

- Right to Access Your Record: You can ask for your medical information by writing to Integra, or by calling Integra to request a release form for this purpose. Your request should describe the specific information that you want to review. There may be certain information that we cannot provide such as psychotherapy notes, or information collected in anticipation of a claim or legal proceeding.
- Right to Amend/Correct: You can ask Integra to change your medical information if you can show that it is wrong, or that information is missing. In order to do this, you must send your request in writing or call Integra to request a form to change your medical record. If we do not believe that the changes that you have requested are appropriate, we will notify you in writing of how you can object to that decision, and how that objection will be included in your records.
- Right to Information About Who Accessed Your PHI: You can get a list of who received your medical information over a specific time period, which cannot be longer than the prior 6 years. This list will not include disclosures that were made for purposes of payment, treatment or operations, or disclosures that you authorized in writing. The first time that you request a list of disclosures in any 12-month period, we will provide it to you for free. If you request additional lists of disclosures during that 12-month period, we may charge you a fee to cover our costs in providing the additional lists.
- Right to Request Restriction: You can request restrictions on the way in which Integra uses or discloses your medical information to treatment, payment and health care operations. We may not agree with the restrictions that you request.
- Right to Request Special Handling of Communications: You have the right to ask Integra to send information to you in another way, or at a different address or location, if you believe that you may be endangered by Integra's usual form of communicating with you. If you make this request, you must state that you are asking for the change because you feel

endangered, but you do not have to explain why you feel endangered. If you make this request, you must specify where or how you want to receive information, and/or how we should contact you to discuss. Integra will attempt to help you with all reasonable requests.

- **Right to Designate a Personal Representative and Grant Access to Your PHI:** You have the right to designate a representative to act on your behalf and ask Integra to provide to this designee a full access to all of your records. If you would like someone to act as your personal representative, you must complete and return a Personal Representative Request Form to Integra. You may obtain this form by contacting your care manager or Member Services.
- **Right to Cancel Previous Authorization:** You have the right to cancel previous authorization for use or disclosure of your protected health information. We must have your written permission/authorization to use or share your information for any reason other than for reasons provided above (payment, health care operations, etc.). Generally, we ask you to grant this authorization at the time of your enrollment and the proof of your authorization is kept on file as part of your record. You may have also authorized Integra to share your health information with your personal representative. If at any point you change your mind and want to cancel your authorization or restrict the type of information we can share, you have the right to do so by so indicating in writing.

C. Complaints Regarding Your Privacy Rights

You may file a complaint with Integra, or with the Secretary of the United States Department of Health and Human Services if you believe that your privacy rights have been violated. You will not be discriminated against, penalized or retaliated against by Integra if you file a complaint. If you want to file a complaint with Integra, submit your complaint in writing to:

Grievances Unit
Integra Managed Care
1981 Marcus Avenue, Suite 100
Lake Success, NY 11042

Or, you may submit a complaint to the Secretary of the United States Department of Health and Human Services at:

Office for Civil Rights
U.S. Department of Health and Human Services
Jacob Javits Federal Building
26 Federal Plaza, Suite 3312
New York, NY 10278

D. Changes to the Notice of Privacy Practices

Integra may make changes to this Notice of Privacy Practices. We will promptly revise and distribute this Notice of Privacy Practices whenever we make a material change to the uses or disclosures allowed in this notice, a material change to your individual rights, a material change in our legal duties, or a material change in any other privacy practice contained in this

notice. The most current notice will be made available on Integra's website at www.integramanagedcare.com as soon as it is available. We will always distribute notice of any material change within 60 days of any material change. If we change the Notice of Privacy Practices, the new terms will apply to all of your medical and personal information, whether we received it before or after such changes.

E. Effective Date

This Notice of Privacy Practices is effective as of April 1, 2012.