

Hulse/QM Healthcare Advocacy Program Notice of Privacy Practices

THIS NOTICE DESCRIBES HOW PERSONAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

At Hulse/QM, we are committed to protecting the privacy of the personal information college and university students and parents provide to us in the course of enrolling in school sponsored health plans and filing claims for health-related purposes. "Personal information" includes your Social Security Number and your individually identifiable health information, including demographic information, collected from you or created or received by a health care provider, a health plan, or a health care clearinghouse that relates to: (i) your past, present, or future physical or mental health or condition; (ii) the provision of health care to you; or (iii) the past, present, or future payment for the provision of health care to you. This Notice describes our privacy practices, which include how we may use, disclose, collect, handle, and protect personal information of students enrolled in colleges and universities which participate in the Hulse/QM Healthcare Advocacy Program. If you have questions about any part of this notice or if you want more information about the privacy practices at Hulse/QM please contact us:

Hulse/QM
5 East Main Street
Mechanicsburg, PA 17055
1-800-766-7090

This notice describes Hulse/QM's practices and that of:

- ◆ All departments and units of Hulse/QM.
- ◆ All employees, staff, trainees, and contractors.

I. Personal Information Compiled By Hulse/QM When Enrolling Students In School-sponsored Health Plans And Processing Claims

As part of the Hulse/QM Healthcare Advocacy Program, you will be asked to provide certain personal information required to enroll you in the school-sponsored health plan or to obtain a waiver from participating in the health plan. Depending upon the health insurance plan chosen by your school, in order to enroll you in the health insurance plan you will be asked to provide your full name, gender, date of birth, your address, your student identification number, and, in some cases, depending upon your school's health plan, your Social Security Number. If you are covered by your own health insurance plan and request a waiver from participating in your school's health plan, you will be asked to provide proof of insurance, including the name of the health insurance carrier, the plan number, and your personal plan identification number.

As a participant in your school's health plan, you will have at your disposal healthcare advocacy offered through the Hulse/QM Healthcare Advocacy Program. If you have

questions about your coverages or require assistance in processing a claim, our healthcare advocates stand ready to answer your questions and assist you with your claim. In the context of providing these services, Hulse/QM may require additional information from you, including personal medical or health information.

II. How Hulse/QM May Use or Disclose Your Personal Information

Healthcare providers are subject to strict privacy requirements under the HIPAA Privacy and Security Rules, 45 C.F.R. Parts 160, 162, and 164, with respect to the use and disclosure of your protected health information. While Hulse/QM is not subject to the HIPAA Privacy and Security Rules, protecting the privacy of your personal information is of paramount importance to Hulse/QM.

Each time you visit a hospital, physician, or other healthcare provider, a record of your visit is made. Typically, this record may contain your symptoms, examination and test results, diagnoses, treatment, and a plan for future care or treatment. This information, often referred to as your health or medical record, serves as a:

- ◆ Basis for planning your care and treatment
- ◆ Means of communication among the many health professionals who contribute to your care
- ◆ Legal document describing the care you received
- ◆ Means by which you or a third-party payer can verify that services billed were actually provided
- ◆ A tool in educating health professionals
- ◆ A source of data for medical research
- ◆ A source of information for public health officials charged with improving the health of the nation
- ◆ A source of data for facility planning and marketing

*This list includes the most likely uses of personal health information

Understanding what is in your medical record and how your health information is used helps you to: ensure its accuracy, better understand who, what, when, where, and why others may access your health information, and make more informed decisions when authorizing disclosure to others. Your medical record is the property of healthcare provider, but the information in the medical record belongs to you. At Hulse/QM, we will not have access to your medical record, unless you provide us with separate prior written authorization to discuss your treatment with your health care provider.

The following categories describe different ways that we use and disclose personal information which you provide to us. For each category of uses or disclosures we will explain what we mean and try to give some examples. Not every use or disclosure in a category will be listed. However, all of the ways we are permitted to use and disclose information will fall within one of the categories.

- ◆ **For Enrollment.** We will use your personal information during the enrollment process in order to register you for enrollment in the health plan selected by your school. We will share your personal information, including your name, address, telephone number, date of birth, and Social Security

Number, with the health insurance carrier during the open enrollment period. If you apply for a waiver from enrolling in the school-sponsored health plan, we will be providing your proof of insurance and related information with your school. We track student enrollment and share this information with your school. Enrollment actions, including enrollments, cancellations, and changes, are transmitted electronically to the health insurance carrier. Finally, we may share your personal information with your school, the health insurance carrier or health care plan when resolving issues related to your eligibility and enrollment in the school-sponsored health plan.

- ◆ **For Healthcare Advocacy.** As part of the services we provide under our Healthcare Advocacy Program, Hulse/QM is available to answer questions students and parents may have with respect to health insurance claims. Our healthcare advocates are prepared to offer directional assistance, assisting you with filing your claim for health related services. Additionally, with your written authorization, at your request our healthcare advocates will directly intervene on your behalf in processing the claim with the insurance carrier or health care plan. In either case, Hulse/QM may require additional personal information from you, including specific information related to your health condition. This information may be shared with your insurance carrier and the health care provider. Hulse/QM will maintain case management files on all claims where we are asked to intervene, which information may be disclosed only to Hulse/QM employees, the insurance carrier, and health care provider.
- ◆ **For Expanded Athletic Services.** In some cases, schools have elected to participate in Expanded Athletic Services through the Hulse/QM Healthcare Advocacy Program, in which Hulse/QM administers all athletic injury insurance claims, whether through the school-sponsored plan or the student's private insurance carrier. Hulse/QM will advise students and parents of the nature and limits of their available insurance coverage, and assist with submitting the insurance claim. Hulse/QM will maintain case management files on all athletic injury insurance claims which we process on behalf of you and your school, information from which may be disclosed to Hulse/QM employees, school officials with a need to know, the health insurance carrier, and the health care provider.
- ◆ **Business Associates.** We may disclose personal information to "business associates" who provide contracted services such as accounting, legal representation, data processing, and consulting. If we do disclose personal information to a business associate, we will do so subject to a contract that provides that the information will be kept confidential.

Other Disclosures That Are Permitted Without Obtaining Authorization

1. **Plan Sponsors.** We may disclose your personal information to the plan sponsor of your school's health plan to permit the plan sponsor to perform plan administration functions. For example, a plan sponsor may contact us regarding

a member's question, concern, issue regarding claims, benefits, service, coverage, etc. We may also disclose summary health information (as defined in the HIPAA Privacy Rule) about the enrollees in your group health plan to the plan sponsor to obtain premium bids for the health insurance coverage offered through your group health plan or to decide whether to modify, amend or terminate your group health plan.

2. **Law enforcement:** We may disclose personal information for law enforcement purposes as required by law or in response to a valid subpoena or search warrant. (eg. child protection, etc)
3. **Change of Ownership:** In the event that Hulse/QM is sold or merged with another organization, your personal information/record will become the property of the new owner.
4. **State and Federal Government Regulatory Oversight:** We may disclose personal information to a health oversight agency for activities authorized by law. These oversight activities include, for example, audits, investigations, inspections, and licensure. These activities are necessary for the government to monitor the health care system, government programs, and compliance with civil rights laws.
5. **Lawsuits and Disputes.** If you are involved in a lawsuit or a dispute, we may disclose personal information about you in response to a court or administrative order. We may also disclose personal information about you in response to a subpoena discovery request, or other lawful process by someone else involved in the dispute.

III. Other Uses and Disclosures of Your Personal Information

Other uses and disclosures of your personal information that are not described above will be made only with your written authorization. If you provide us with such authorization, you may revoke the authorization in writing, and this revocation will be effective for future uses and disclosures of your personal information. However, the revocation will not be effective for information that we already used or disclosed, relying on the initial authorization.

IV. Your Personal Information Rights

The following is a description of your rights with respect to your personal information:

1. **Right to Access.** You have a right to look at or get copies of your personal information which we maintain on file in a designated record. A "designated record" may contain billing records, medical records, as well as other records used in processing health insurance claims.
2. **Right to an Accounting.** You have a right to receive an accounting of disclosures of your personal information made by Hulse/QM, except that

Hulse/QM does not have to account for the disclosures for treatment, payment, health care operations, information provided to you or with your authorization, directory listings and certain government functions.

3. **Right to a Paper Copy of this Notice.** You have a right to a paper copy of this Notice of Privacy Practices.

V. Our Responsibilities

Hulse/QM is committed to:

- ◆ Maintaining the privacy of your personal information through the implementation of physical, technical, and administrative safeguards designed to maintain your personal information in a secure environment.
 - ◆ Providing you with a notice as to our privacy practices with respect to information we collect and maintain about you.
 - ◆ Abiding by the terms of this notice.
 - ◆ Notifying you if we are unable to agree to a requested restriction.
 - ◆ Accommodating reasonable requests you may have to communicate personal information by alternative means or at alternative locations.
- We will not use or disclose personal information without authorization, except as described in this notice. You may revoke an authorization, in writing, at any time. If you revoke your authorization, we will no longer use or disclose information that you had given permission to use or disclose. We are not able to take back any disclosures that were already made with your permission.
 - We will provide personal information without authorization when necessary for treatment, payment or healthcare operations.

VI. How We Protect Information

At Hulse/QM, we restrict access to our members' non-public personal information to those employees, agents, consultants, college or university representatives, insurance carriers, and health care providers who need to know that information in order to provide health products or services or process claims. We maintain physical, technical, and administrative safeguards and adopt best management practices to guard non-public personal financial and health information from unauthorized access, use and disclosure.

VII. Changes to this Notice of Privacy Practices

Hulse/QM reserves the right to amend this Notice of Privacy Practices at any time in the future. Revisions to the Notice of Privacy Practices will be made available on the Internet at www.hulseqm.com.

VIII. Complaints

Complaints about this Notice of Privacy Practices or how Hulse/QM handles your health information should be directed to:

Hulse/QM
5 East Main Street
Mechanicsburg, PA 17055
1-800-766-7090

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