

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. **A**

PLEASE REVIEW IT

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If you

direct mail or hand delivery. A copy of the revised Notice of Privacy Practices will also be posted on our company <https://www.pace.edu/human-resources>.

HIPM only protects certain medical information known as "protected health information." Generally, protected health information is information created or received by a health care provider, a health care clearing house, a health plan, or your employer on behalf of your health

threat. For example, we may disclose your protected health Information In case of exposure to a highly infectious disease.

To Plan Sponsors. For plan administration purposes, your protected health Information may be disclosed to specifically designated employees of your employer. Those employees will only use or disclose that protected health Information necessary to perform plan administration functions or as otherwise required or permitted by HIPM. Your employer may not use protected health Information for employment purposes without your express authorization. Information may be disclosed to another health plan (as described by HIPAA) maintained by Pace University for purposes of facilitating claims payable under that plan or for other purposes permitted by HIPAA.

To Business Associates. We may contract with Individuals or entities known as Business Associates to perform various functions on behalf of the Plan or to provide certain types of services. In order to perform these functions or to provide these services, Business Associates will receive, create, maintain, transmit, use, and/or disclose your protected health information, but only after they agree In writing to Implement appropriate safeguards regarding your protected health Information. For example, we may disclose your protected health information to a Business Associate such as a third- party administrator to process your claims for Plan benefits.

necessary to comply with laws relating workers' compensation or similar programs, that provide benefits for work-related Injuries or Illness without regard to fault.

Public Health Risks. We may disclose your protected health information to public health authorities. Reportable activities generally include the following:

- to prevent or control disease, Injury or disability;
- to report births and deaths;
- to report child abuse or neglect;
- to conduct public health surveillance, Investigation, or Intervention;
- to notify a pe2.998 0eq0 0 612 792 reW*ñBT/TT1 11.04 Tf1.0426 0 0 1 107.54 591.0.94 Tm()TjETEMCO 0 612

(i.e., a list) of your protected health information where such disclosures

Complaints

If you believe your privacy rights have been violated, you may file a complaint with the Plan. To file a complaint with the Plan, contact Erin McGuire, the Privacy Officer for the P4.004 (u)1@erle