

We use and disclose protected health information or “PHI” in a number of different ways in connection with healthcare operations, the payment for healthcare, and treatment. The following are only a few examples of the types of uses and disclosures of PHI that we are permitted to make without individual authorization.

- A. **Payment:** We will use and disclose PHI to administer health benefits policy or contract, which may involve the determination of eligibility; claims payment; utilization review and care management; medical necessity review; coordination of care, benefits and other services; and responding to complaints, appeals and external review requests. Likewise, we may also share PHI with another entity to assist with subrogation of health claims or to another health plan to coordinate benefit payments. In some instances, we may also use and disclose PHI for purposes of premium billing, underwriting, and the determination of premium rates and co-payments, deductibles, co-insurance and other cost-sharing amounts.
- B. **Treatment:** We may disclose PHI to healthcare providers (doctors, dentists, pharmacies, hospitals and other caregivers) who request it in connection with treatment. We may also disclose PHI to healthcare providers in connection with preventive health, early detection and care management programs, in plans that offer these programs.
- C. **Health Care Operations:** We will use and disclose your Protected Health Information to support other business activities, including the following:
 - Quality assessment and improvement activities: peer review and credentialing of Network Providers and accreditation by independent organizations such as the National Committee for quality assurance and the Utilization Review Accreditation Commission.
 - Performance measurement and outcomes assessment, health claims analysis and health services research;
 - Operation of preventive health, early detection, care management, and coordination of care programs in plans that offer these programs, including information about treatment alternatives, therapies, health care providers, settings of care or other health-related benefits and services;
 - Medical care review;
 - Underwriting, premium determination and administration of reinsurance;
 - Risk management, auditing, legal services and detection and investigation of fraud and other unlawful conduct;
 - Transfer of eligibility and plan information to business associates (for example, pharmacists, mental health management companies for the management of mental health benefits, and other programs as necessary to administer your benefit plan.
 - Other general administrative activities, including data and information systems management and customer service.

Individual Right of Access and Additional Information

QualChoice maintains strict adherence to the protection and confidentiality of PHI. Additional information within QualChoice may be directed to the Privacy Official, Security Official, or the Office of the General Counsel. In addition, any individual may request and receive a copy, including an electronic copy of his or her PHI on file with QualChoice. Please submit inquiries or requests to: QualChoice, ATTN: Privacy Official, 12615 Chenal Parkway, Ste. 300, Little Rock, AR 72211, P: 501.219.5126.

Individual questions or concerns may also be addressed by the Department of Health & Human Services online at <http://www.hhs.gov/ocr/privacy/hipaa/complaints/> and/or file a Health Information Privacy Complaint with the Office for Civil Rights (OCR). Note that if filed with the OCR, such complaint must:

1. Be filed in writing, either on paper or electronically, by mail, fax, or e-mail;
2. Name the covered entity or business associate involved and describe the acts or omissions you believe violated the requirements of the Privacy, Security, or Breach Notification Rules; and
3. Be filed within 180 days of when you knew that the act or omission complained of occurred.

Any questions or concerns relating to this Notice or in connection with our Provider Agreements or our Business Associate Agreements, may be directed to your Provider Relations Representative (501.228.7111, ext. 7004) or QualChoice General Counsel (501.219.5126).