



NOTICE OF PRIVACY PRACTICES

THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO YOUR HEALTH INFORMATION. THIS SUPERSEDES ANY PREVIOUS NOTICE OF PRIVACY PRACTICES ISSUED BY VAYA HEALTH. PLEASE READ IT CAREFULLY.

Vaya Health (“Vaya”) is required by law to maintain the privacy of your health information, to provide you with a notice of our legal duties and our privacy practices regarding your health information, and to notify affected individuals following a breach of unsecured health information. We are required to abide by the Notice of Privacy Practices (“Notice”) currently in effect, but we reserve the right to change the terms of our Notice at any time, and such changes will be effective for all health information that we maintain. You may access our current Notice on our website, or you may obtain a copy of our Notice by contacting us at the phone number and address listed below.

Understanding Your Medical Record/Health Information

Each time you visit a healthcare provider, a record of your visit is made. Typically, this medical record contains your symptoms, assessment, diagnosis, treatment plan, and treatment recommendations. These records may also disclose or reveal that you are a recipient of public welfare benefits such as Medicaid. These records are considered to be Protected Health Information (PHI) and are confidential under the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”). Understanding what is in your medical record and how, when and why Vaya uses the information helps you make informed decisions when authorizing disclosure to others. Your health information will not be disclosed without your authorization unless required or allowed by State and Federal laws, rules or regulations. We are only allowed to use and disclose PHI in the manner described in this Notice.

How Vaya May Use or Disclose Your Health Information

The following categories describe ways that Vaya may use or disclose your health information without your consent or authorization under HIPAA. Any use or disclosure of your health information will be limited to the minimum information necessary to carry out the purpose of the use or disclosure. For each category of uses and disclosures, we will explain what we mean and present some examples. Not every use or disclosure in a category will be listed. However, all the ways we are permitted to use and disclose information will fall within one of the categories. Please note that other State and Federal laws, rules and regulations may be more stringent than what is listed here. We will always comply with the most stringent law, rule or regulation.

To help manage the treatment you receive: We can use your health information and share it with professionals who are treating you. Example: A provider sends us information about your diagnosis and treatment plan so we can authorize services. We also might need to share information with other providers you have been referred to for treatment and for care coordination purposes, and to help determine your eligibility for benefits.

To pay for your health services: We can use and disclose your health information as we pay claims for your health services. Example: We share information about you with your provider to coordinate payment for your health treatment.

To administer a Vaya Health Plan: We may disclose your health information to federal or state regulatory authorities for plan administration. Example: the NC Department of Health and Human Services (DHHS) contracts with us to provide a health plan for Medicaid beneficiaries, and we provide them with certain statistics and reports to explain our costs.

For internal operations: We may use and disclose your health information for our internal operations. For example, we may use this information to coordinate benefits, conduct utilization review, authorize services, examine medical necessity, issue explanations of benefits, conduct quality assessment and improvement activities, engage in care coordination, monitor providers, address complaints and appeals, and to otherwise manage Vaya’s operations. We may use or disclose your health information for all activities that are included within the definition of “payment” and “health care operations” but we have not listed all of the activities in this Notice, so please refer to 45 CFR § 164.501 for a complete list. We may also disclose information to individuals and entities that we contract with, called “business associates,” who perform activities on our behalf, such as technical support or utilization management. To perform these functions, business associates will receive, create, maintain, use, or disclose health information, but only after we require the business associate to agree in writing to contract terms designed to appropriately protect your information.

For your benefits and services: We may use your health information to contact you with information about health-related benefits and services, or about treatment options that may be of interest to you. We may also disclose your health information to help establish your eligibility to receive public benefits. We never market or sell your health information.

To help with public health and safety issues: We may disclose your health information to a health care provider who is providing emergency medical services to you, or to an organization helping with disaster relief efforts so that your family can be notified about your condition if you do not object. We may also disclose your health information as needed for other public health and safety issues. For example:

- Preventing or reducing a serious threat to any person’s health or safety or to property
- Preventing or controlling disease, injury, or disability
- Cooperating with public health investigations and interventions
- Helping with product recalls of health supplies and equipment paid for by Vaya
- Reporting adverse reactions to medications
- If Vaya determines it is in your best interest to file a petition for involuntary commitment or guardianship

For Health Oversight Activities: We may disclose your health information to a health oversight agency for audits, investigations, inspections, licensure, or disciplinary actions, or civil, administrative, or criminal proceedings or actions. Oversight agencies include government agencies that oversee the health care system, government benefit programs, other government regulatory programs, and compliance with civil rights laws. For example, we may disclose information to DHHS.

To help with national security: We may disclose to military authorities the health information of armed forces personnel under certain circumstances. We may disclose to authorized federal officials health information required for lawful intelligence, counterintelligence, and other national security activities.

To do research: We can use or share your information for health research in limited circumstances. We have to meet many conditions in the law before we can share your information for this purpose. For more information, visit www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html.

To comply with the law: We will share information about you if and to the extent that state or federal laws require it. For example, we may share information with the U.S. or NC DHHS to show that Vaya is in compliance with federal privacy law. Other examples include:

- To report suspected abuse, neglect, or domestic violence to the Department of Social Services or to law enforcement
- To report a crime that has occurred on Vaya premises or to report a crime in an emergency situation
- To report limited health information if an individual escapes from a 24-hour facility or breaches a condition of release
- To comply with workers’ compensation laws and other similar programs that provide benefits for work-related injuries or illnesses

To correctional institutions: If you are an inmate of a correctional institution, we may disclose your health information to the correctional institution or to a law enforcement official to provide health care to you, for your health and safety and the health and safety of others, or for the safety and security of the institution.

For legal proceedings and enforcement: We may disclose your health information in response to court or administrative proceeding or order, subpoena, discovery request, or other lawful process under certain circumstances. We will never share information about you in response to a subpoena unless it is accompanied by a court order. Under limited circumstances, we may disclose your health information to a law enforcement official to locate or identify a suspect, fugitive, material witness, crime victim, or missing person.

To work with a medical examiner: We can share health information with a coroner or medical examiner when an individual dies.

Applicability of 42 CFR Part 2: Some of the permitted uses and disclosures described above may be limited by federal rules governing the confidentiality of alcohol and drug abuse treatment records (42 CFR Part 2). We will never share any substance use treatment records without your written permission, except as required by law. Please note that 42 CFR Part 2 requires or allows us to share alcohol and drug abuse records with others in specific situations in which you do not have to give consent or have the opportunity to agree or object to the use and disclosure. Prior to disclosing substance use treatment information under one of these exceptions, we will evaluate each request to ensure that only the minimum necessary information will be disclosed. These situations include, but may not be limited to the following:

- To medical personnel in a medical emergency
- To qualified personnel (including DHHS representatives) for audit and program evaluation activities
- For scientific research purposes under limited circumstances
- To respond to a lawfully issued subpoena and court order
- To a county Department of Social Services or law enforcement to report child abuse, neglect or exploitation
- To law enforcement in relation to the commission of a crime on Vaya premises or against Vaya staff or a threat to commit such a crime
- To qualified service organizations when appropriate. (These are entities which perform administrative services for Vaya such as data analysis, software development, or legal, medical, accounting, or other professional services. They must agree to abide by 42 CFR Part 2.)

Disclosures To You and to Others You Authorize

We must disclose your health information to you and/or your personal representative, as described in the “Your Rights” section of this Notice. You may give us written permission to use your health information or to disclose it to anyone for any purpose, and you may revoke this permission by notifying us in writing at any time. You can also plan ahead and develop a crisis plan that tells us who to share your health information with if you experience a medical, mental health, or substance use crisis. Except in an emergency, we will not share information about you with your family and friends unless you give us written permission. In some limited circumstances we may share information based on your oral permission to share with a family member or close friend who is involved with your treatment.

YOUR RIGHTS: WHEN IT COMES TO YOUR HEALTH INFORMATION, YOU HAVE CERTAIN RIGHTS. THIS SECTION EXPLAINS YOUR RIGHTS AND SOME OF OUR RESPONSIBILITIES TO HELP YOU.

You have the right to a copy of your health and claims records: You can ask to see or get a copy of your health and claims records and other health information we have about you. For more information about how to do this, contact PrivacyOfficer@vayahealth.com. If you wish to view your health information, you must make your request in advance. If you send us a request, we will provide a copy or a summary of your health and claims records, usually within 30 days of your request. We may charge a reasonable, cost-based fee. **Exception:** In some circumstances disclosure to you may not be in your best interest, such as when a physician or mental health professional determines that disclosure would be injurious to your physical or mental well being. If disclosure is not made to you for this reason, you can choose to have your health information sent to a physician or psychologist of your choice. If psychotherapy notes are included in your health record, we are not allowed to provide a copy of the notes to you. You must request them directly from your provider.

You have the right to ask us to correct your health and claims records: You can ask us to correct your health and claims records if they are records created by us and you think they are incorrect or incomplete. For more information about how to do this, contact PrivacyOfficer@vayahealth.com. We may say “no” to your request, but if so we will explain why in writing within 60 days.

You have the right to request confidential communications: You can ask us to contact you in a specific way (for example, home phone, cell phone, email or text) or to send paper mail to a different address. We will consider all reasonable requests, and we will allow the request if you tell us you would be in danger if we do not.

You have the right to ask us to limit what and with whom we use or share your health information: You can ask us not to use or share your health information for treatment, payment, or our operations. You can ask us not to share specific information with your family, close friends, or others involved in your care. You can ask us not to use or share your health information with Community Care of North Carolina or with another health care provider that does not primarily provide mental health, substance use, or intellectual/developmental disabilities services, such as a primary care physician or a hospital emergency department. We must agree to your request if you ask us not to share information with another health plan, such as an insurance company. For all other disclosures, we are not required to agree to your request, and we may say “no” if it would affect your care. For example, if we cannot pay for your treatment without sharing the information, we may say “no.”

You have the right to ask for a list of those with whom we've shared your information: You can ask for a list (accounting) that identifies disclosures of your health information that Vaya has made for the six years prior to the date you ask. The list will include who we shared it with, and why. The list of disclosures will include all disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as disclosures to you, to individuals involved in your care, or to others that you asked us to make, redisclosures occurring as a result of permitted uses and disclosures, disclosures required by law, and disclosures that do not identify you). We will provide one accounting a year for free but we will charge a reasonable, cost-based fee if you ask for another one within 12 months of your last request.

You have the right to a copy of this Notice: You can ask for a paper copy of this Notice at any time, even if you have agreed to receive the Notice electronically. You can also ask for a copy of this Notice in another language or format that is easier to read.

You have the right to choose someone else to act for you: You can identify another person, such as a health care power of attorney, to exercise your rights and make choices about your health information. We will make sure this person has the authority and can act for you before we take any action.

You have the right to file a complaint if you think your rights have been violated: You can complain if you feel we have violated your rights by contacting us by email at PrivacyOfficer@vayahealth.com or by calling 1-888-757-5726. You can also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, SW., Washington, D.C. 20201, by calling 1-877-696-6775, or by visiting www.hhs.gov/ocr/privacy/hipaa/complaints/. We will never retaliate against you for filing a complaint.

QUESTIONS OR CONCERNS?

If you would like more information about our privacy practices or have questions or concerns, please contact us using the information below:

Email: PrivacyOfficer@vayahealth.com
Telephone: (888) 757-5726
Website: www.vayahealth.com
Address: Privacy Officer
Vaya Health
200 Ridgefield Court, Suite 206
Asheville, NC 28806

EFFECTIVE DATE: This Notice of Privacy Practices was revised effective October 1, 2015.

APPLICABILITY: This Notice of Privacy Practices applies only to Vaya Health. Providers in Vaya’s network of providers are required to have their own Notice of Privacy Practices.