Access Your Health Info with myACP

Members who receive care at any of the AdvantageCare Physicians’ (ACP) 36 locations in New York City and Long Island can now get fast, secure access to their most important health information online, anytime. ACP provides members with a patient-centered approach to care. Whether you need to see a specialist, get an X-ray, have blood drawn or a mammogram — in most instances, it can all take place at the same location — coordinated by your primary doctor. And now when you sign up for myACP, you’ll have easy access to your medical record and lab results. Plus, you can keep track of your appointments, request prescription refills and even send questions to your medical office — right from your computer, tablet or smartphone.

To learn more about AdvantageCare Physicians, visit acpny.com. Sign up for myACP and activate your account at the bottom of their webpage.

The benefit information provided is a brief summary, not a complete description of benefits. For more information, contact EmblemHealth. Limitations, copays and restrictions may apply. Benefits, formulary, pharmacy network, premium copays and coinsurance may change on January 1 each year.
Are You Getting All Needed Preventive Care?

Regular checkups are important at all ages. It’s the best way to get the health care advice and services you may need. If you’re only going to the doctor when you are sick, there isn’t time for your doctor to focus on other health care issues that may need to be addressed. Not sure when to see the doctor for a checkup? Here are some guidelines for routine checkups:

<table>
<thead>
<tr>
<th>PREVENTIVE CARE</th>
<th>Who</th>
<th>What</th>
<th>When</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Children</strong> (birth to age 12)</td>
<td>• Needed immunizations, including flu&lt;br&gt;• Body mass index (BMI) with counseling for nutrition and physical activity&lt;br&gt;• Assistance managing chronic conditions like asthma and diabetes&lt;br&gt;• Assistance managing medications like those for Attention Deficit Hyperactivity Disorder (ADHD)</td>
<td>• Six preventive care visits between birth and 15 months&lt;br&gt;• One preventive care visit annually beginning at age 2</td>
<td></td>
</tr>
<tr>
<td><strong>Adolescents</strong> (age 12-21)</td>
<td>• Needed immunizations, including flu&lt;br&gt;• BMI&lt;br&gt;• Counseling for risky behaviors (such as sexual activity, drug and alcohol abuse and tobacco use) and screening for depression&lt;br&gt;• Assistance managing chronic conditions like asthma and diabetes&lt;br&gt;• Assistance managing medications like those for ADHD and depression</td>
<td>• One preventive care visit annually</td>
<td></td>
</tr>
<tr>
<td><strong>Adults</strong> (age 18 and up)</td>
<td>• Needed immunizations, including flu&lt;br&gt;• BMI&lt;br&gt;• Cancer screenings such as breast, cervical, colorectal and skin&lt;br&gt;• Blood pressure screening&lt;br&gt;• Assistance managing chronic conditions like asthma, diabetes, high blood pressure&lt;br&gt;• Assistance managing medications like those for depression&lt;br&gt;• Monitoring the effects of certain medications such as digoxin, diuretics and ACE/ARBs&lt;br&gt;• Discussing aspirin use, smoking cessation</td>
<td>• One preventive care visit annually</td>
<td></td>
</tr>
</tbody>
</table>

**What Is Utilization Management?**

When a health plan uses medical guidelines to consider your need for health care services, this is known as utilization management (UM). EmblemHealth makes UM decisions based only on the appropriate level of care and the proper medical setting for your health needs. We never reward doctors or other individuals who conduct UM reviews for denying coverage of care. Any financial rewards we provide to UM decision-makers are not encouraged by decisions resulting in decreased use of services or care.

**Small Steps to a Healthier You**

The wait is finally over! Our Small Steps to a Healthier You app is here and it’s FREE! Now you can set and track goals, get useful tips, find local healthy resources and earn fun badges along the way. Download the app now and take a small step toward a healthier you! Available on all iOS and Android devices.
Working to Improve Your Care

Our Quality Improvement Program works to improve medical and behavioral health care and services that our members receive from our network of doctors, practitioners, hospitals and other providers. We help:

- **You stay healthy** with educational mailings, phone calls, newsletters and a website that encourages healthy behaviors, like getting preventive care. Our materials feature science-based health information you can trust.

- **You recover quickly** or live well with chronic illness through our health and case management programs. These programs help you better understand and manage conditions such as cancer, depression, diabetes, high-risk pregnancy, HIV/AIDS, hypertension and organ transplants.

- **Our doctors are provided with tools and resources** to deliver the best care.

Please visit emblemhealth.com for more on our Quality Improvement Program and its success.

Your Guide to Timely Care

Waiting to see the doctor isn’t fun for anyone. And depending on your condition, waiting too long could be dangerous. Doctors must provide you with urgent and routine care in a timely manner. When you can expect to see a doctor depends on the reason:

- **Urgent care** — within 24 hours of calling your doctor. You can also go to an in-network urgent care center in the network instead of the emergency room for many urgent medical needs

- **Nonurgent sick visits** — within 48 to 72 hours of calling your doctor

- **Routine mental health or drug abuse concerns** — within 10 business days of your request

- **Routine care** — within 4 weeks of calling your doctor

- **Routine specialty care** — within 4 weeks of your request

Keep Your Treatment Team in the Loop

A number of general medical illnesses such as heart disease, cancers, diabetes and neurological illnesses are frequently accompanied by behavioral health and substance abuse problems. If you are affected, you may see different types of practitioners for your care.

To receive the best care, keep both your medical doctor and behavioral health practitioner informed of all issues. Treating both conditions effectively will have the greatest impact on your recovery.

Here’s what you can do:

- Tell your medical doctor about other providers that you see, especially specialists in behavioral health, therapists and psychiatrists.

- Sign a “Release of Information” form for your behavioral health practitioner and ask him/her to share relevant information with your medical doctor.

- Ask your medical doctor to discuss your care and treatment plan with your behavioral health practitioner.

As your health plan, we will work with our contracted practitioners to remind them about consulting with each other and sharing relevant information at your request.
Your Breast Reconstruction Surgery Benefits

The Women’s Health and Cancer Rights Act of 1998 requires health plans to cover breast reconstruction following a mastectomy, as well as provide a notice of this coverage each year.

We understand that there are many important decisions to consider before undergoing reconstructive breast surgery. If a covered member has a mastectomy, lymph node dissection or lumpectomy and decides after consulting with his or her doctor to have reconstructive surgery, covered services would include:

- Reconstruction of the breast on which the mastectomy was performed
- Prostheses
- Surgery and reconstruction of the other breast to produce a symmetrical (similar) appearance
- Treatment of physical complications at any stage of the mastectomy, including lymphedema care

Please be aware that this coverage is only for members diagnosed with breast cancer. Benefits do not apply to elective cosmetic surgery, which is not covered. As with your other surgical benefits, this coverage may be subject to a copay or annual deductible, if required by your contract. Please refer to your Member Handbook and Contract or Certificate of Coverage for details.

Questions? Please call the Customer Service phone number on the back of this newsletter or visit emblemhealth.com.

YOUR PRIVACY RIGHTS

We respect the confidentiality of your health information and we are committed to ensuring that this information is kept private and secure. Please see the Notice of Privacy Practices that appears at the center of this newsletter. It explains how we use information about you and when we can share that information with others.

Call the Shots: When to Act to Prevent Childhood Disease

You can prevent your child from getting 14 diseases if you have your child vaccinated. You should schedule your newborn’s first round of vaccines before his or her first birthday.

Within that first year, follow the recommended vaccination schedules provided by your child’s doctor.

RECOMMENDED FIRST YEAR SCHEDULE:
Between Birth and 1 Month Old: Hepatitis B
2 Months Old: Diphtheria, Hib Disease, Pertussis, Polio, Pneumococcal Pneumonia, Rotavirus, Tetanus
6 Months Old: Flu
12 Months Old: Chickenpox, Hepatitis A, Measles, Mumps, Rubella

TEENS NEED THE FOLLOWING IMMUNIZATIONS:
- No later than their 12th birthday:
  — Tetanus, diphtheria and pertussis (Tdap)
  — Meningococcal
- No later than their 13th birthday:
  — Human papillomavirus (HPV) vaccine
A New Path to Health

You or a covered family member can get the support you need to manage diabetes, heart failure, coronary artery disease (CAD) or chronic obstructive pulmonary disease (COPD) by joining our PATH program.

Along with your doctor, we’ll help you take care of your physical, behavioral and emotional health in a way that meets your lifestyle and cultural needs.

The program is free and voluntary. Some members sign up themselves; others are referred by their doctors. Each month we also identify members for the program by reviewing health surveys, claims, pharmacy data, health appraisals, lab results and participation in coaching or other programs.

If you were identified and received a letter, but don’t want to join, please call 1-888-881-3112 to let us know.

Want to Learn More?
You can learn more about the program and see if you are eligible at www.emblemhealth.com/health_management_programs or call us at 1-888-881-3112, Monday through Friday from 8:30 am to 8:30 pm, and Saturday from 9 am to 7:30 pm. Ask about getting help in your language when you call. TTY users can call 711.

Looking for a Doctor in Your Network?
If you are searching to see if a specific doctor is in your network, the best thing to do is to have your ID Card on hand. Be sure to ask the doctor if he/she is part of the network, not whether they take your specific plan.

Adjust Your Care as a Young Adult

Moving from adolescence into adulthood brings many transitions. One of those is the need to find a health care provider who can be your partner in health through your adult life. EmblemHealth can help young adults bridge the transition from adolescent care to adult primary care.

To find a participating doctor in your area, please visit the “Find a Doctor” section at emblemhealth.com. You can also contact our Customer Service department staff who can discuss specific needs and connect young adults to the appropriate network doctor(s) by providing a listing of participating providers. Please call EmblemHealth at 1-877-842-3625.
Cancer Screenings

It’s important to get your yearly routine screenings (tests) for cancer. Catching cancer in the early stages can make treatment easier.

**Colorectal (colon) cancer** — Both men and women starting at age 50 (or earlier if you’re at high risk) should get screened (tested). Talk to your doctor about which of the following tests are right for you:
- Colonoscopy *every 10 years*
- Flexible sigmoidoscopy *every 5 years*
- Fecal occult blood test (FOBT) or fecal immunochemical test (FIT) *every year*

**Breast cancer** — Women aged 40 and older should have a mammogram to test for breast cancer every year.

**Cervical cancer** — Pap tests look for cervical cancer, one of the most easily treated cancers. If you are a woman aged 21 to 29 you should have a Pap test every 3 years. Women between the ages of 30 to 64 should have a Pap test every 5 years.

**Skin cancer** — Everyone is at risk for skin cancer, so start having routine skin exams once a year.

Talk to Your Doctor Show this article to your doctor, talk about your risk and concerns and then get tested.

Take Good Care of Your Diabetes

Diabetes can do damage to your body that you can’t see. That’s why consistent treatment is needed to help prevent it. You should visit your doctor at least once a year for a checkup and tests to help evaluate the current status of your condition.

On your next trip to the doctor, ask to have the following tests:
- **Hemoglobin A1c** (HbA1c) to show the average level of blood sugar (glucose) over the previous 3 months.
- **Blood pressure** to measure the force of blood pushing against blood vessel walls. High blood pressure can lead to coronary heart disease, heart failure, stroke, kidney failure and other health problems.
- **Exam for nephropathy** to be sure your kidneys aren’t being damaged by your diabetes.

One test your doctor won’t do during your visit is a retinal or dilated eye exam. Because diabetes can cause blindness, it’s important to make an appointment with an eye care professional (optometrist or ophthalmologist) every year for this eye exam.

Following your doctor’s instructions and having these tests every year will help you manage this chronic condition.

**REMEMBER:** Members with diabetes can also visit an EmblemHealth Neighborhood Care location, conveniently located in Harlem, Cambria Heights (Queens) or Chinatown. Chat with a nurse or pharmacist about your diabetes questions, get reliable information and find out about diabetes management classes. To learn more about our Neighborhood Care, call us at 1-877-842-3625, Monday through Friday, 8 am to 8 pm.
Having a Baby? Every Doctor’s Visit Matters

See your doctor as soon as you think you’re pregnant. Going to every appointment can help you have a healthy baby. You should see your doctor about 14 times before your baby is due and at least one time between 21 and 56 days after you give birth.

Join our free Healthy Beginnings PATH program: 1-877-736-2229. We’ll help guide you through your pregnancy even if it’s not your first time. You’ll get a pregnancy book, access to a 24/7 nurse call line for your questions and much more. If you are pregnant and having problems, or if your baby is less than 8 weeks old, call 1-888-447-0337 to speak with a maternity nurse case manager.

Do You Smoke?

Nothing good comes from smoking. When you’re ready to quit, our no-cost Tobacco-Free PATH program is available to members aged 18 and older.

Members enrolled in the program get unlimited access to a tobacco cessation specialist, plus full coverage for smoking cessation medicine — nicotine patch, gum or lozenges, or bupropion (generic Zyban®) and Chantix® — under your EmblemHealth pharmacy benefit coverage. Talk to your doctor about quitting and which medicine is right for you.

To join this program, New York State residents please call 1-866-NY-QUITS (1-866-697-8487), nonresidents of New York State, please call 1-877-500-2393. TTY/TDD users should call 711. GHI NY City PPO (active and retirees) should call the National Quitline at 1-800-QUIT-NOW (1-800-784-8669).

Newborns’ and Mothers’ Health Protection Act of 1996

This federal law protects the amount of time you and your newborn child are covered for a hospital stay after childbirth. Under this law, EmblemHealth may not limit hospital stays in connection with childbirth:

• No less than 48 hours following a vaginal birth
• No less than 96 hours following a Cesarean delivery

However, your doctor or nurse midwife may decide, after consulting with you, to discharge you or your newborn earlier. Under New York State Law, if you or your baby is discharged earlier, you can have one home care visit within 24 hours of leaving the hospital.

Understand Your Costs for Care

Making choices on where to get care can be hard when cost is a factor. We want to help you understand all your options so you can make a decision that’s right for you. EmblemHealth’s Treatment Cost Estimator is an easy-to-use tool that provides a side-by-side estimate of out-of-pocket costs — for in- and out-of-network options. It’s a great way to start a discussion with your referring doctor on what option may work best for you. Try it today!

• Log in to emblemhealth.com
• Go to the “Manage Your Health” section
• Select “Treatment Cost Calculator”

Having a Baby? Every Doctor’s Visit Matters

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Are You Registered at emblemhealth.com?

There are many things you can do as a registered member at emblemhealth.com. These easy-to-use timesavers are only a click away. Get started and register today on emblemhealth.com.

1. Review your benefits.
2. Print a temporary ID card.
3. Check on claims.
4. Find covered drugs.
5. Find a doctor in your network.
6. See your prescription history and order refills.
7. Create a personal health record.

Don’t Miss Out on Important Information

Has your address or contact information changed? Please let us know so you’ll receive communications from us, like benefit changes and incentive checks. If mail is returned, we can only reach you if we have the correct telephone number. So call us to confirm that your information is up-to-date.

Go Paperless

Once registered, you can sign up to go paperless. Choose which communications you want to receive electronically in a personal, secure online message center. It’s a great way to reduce clutter, stay organized and store your information in one safe place. Once you sign in and get to your account home page, select “Go Paperless” under “Tools That Help You.”

HOW TO CONTACT US

- EmblemHealth: 1-877-842-3625
- GHI HMO: 1-877-244-4466
- GHI PPO: 1-800-624-2414
- HIP: 1-800-447-8255
- Child Health Plus: 1-855-283-2146

Mental Health and Substance Abuse

- EmblemHealth CompreHealth HMO/EPO: 1-877-347-2552
- EmblemHealth EPO/PPO: 1-866-208-1424
- GHI PPO NYC residents: 1-800-692-2489
- GHI PPO non-NYC residents: 1-866-208-1424
- GHI HMO: 1-888-447-2526
- HIP: 1-888-447-2526

Quit Smoking

- 1-866-NY-QUITS (1-866-697-8487)
- 1-877-500-2392
- 1-800-QUIT-NOW (1-800-784-8669)

Report Insurance Fraud

- 1-888-4KO-Fraud (1-888-456-3728)

Web Resources

- emblemhealth.com
- questdiagnostics.com/patient (Lab)
- valueoptions.com (Mental Health)
IMPORTANT INFORMATION ABOUT YOUR PRIVACY RIGHTS

NOTICE OF PRIVACY PRACTICES

Effective September 1, 2013

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

EmblemHealth, Inc. is the parent organization of the following companies that provide health benefit plans: Group Health Incorporated (GHI), HIP Health Plan of New York (HIP) and HIP Insurance Company of New York, Inc. (HIPIC). All of these entities receive administrative and other services from EmblemHealth Services Company LLC which is also an EmblemHealth, Inc. company.

This notice describes the privacy practices of EmblemHealth companies, including GHI, HIP and HIPIC (collectively “the Plan”).

We respect the confidentiality of your health information. We are required by federal and state laws to maintain the privacy of your health information and to send you this notice.

This notice explains how we use information about you and when we can share that information with others. It also informs you about your rights with respect to your health information and how you can exercise these rights.

We use security safeguards and techniques designed to protect your health information that we collect, use or disclose orally, in writing and electronically. We train our employees about our privacy policies and practices, and we limit access to your information to only those employees who need it in order to perform their business responsibilities. We do not sell information about our customers or former customers.

How We Use or Share Information

We may use or share information about you for purposes of payment, treatment and health care operations, including with our business associates. For example:

- **Payment:** We may use your information to process and pay claims submitted to us by you or your doctors, hospitals and other health care providers in connection with medical services provided to you.

- **Treatment:** We may share your information with your doctors, hospitals, or other providers to help them provide medical care to you. For example, if you are in the hospital, we may give the hospital access to any medical records sent to us by your doctor.

- **Health Care Operations:** We may use and share your information in connection with our health care operations. These include, but are not limited to:
  - Sending you a reminder about appointments with your doctor or recommended health screenings.
  - Giving you information about alternative medical treatments and programs or about health-related products and services that you may be interested in. For example, we might send you information about stopping smoking or weight loss programs.
  - Performing coordination of care and case management.
  - Conducting activities to improve the health or reduce the health care costs of our members. For example, we may use or share your information with others to help manage your health care. We may also talk to your doctor to suggest a disease management or wellness program that could help improve your health.
  - Managing our business and performing general administrative activities, such as customer service and resolving internal grievances and appeals.
  - Conducting medical reviews, audits, fraud and abuse detection, and compliance and legal services.
  - Conducting business planning and development, rating our risk and determining our premium rates. However, we will not use or disclose any of your genetic information for underwriting purposes.
  - Reviewing the competence, qualifications, or performance of our network providers, and conducting training programs, accreditation, certification, licensing, credentialing and other quality assessment and improvement activities.

- **Business Associates:** We may share your information with others who help us conduct our business operations, provided they agree to keep your information confidential.

Other Ways We Use or Share Information

We may also use and share your information for the following other purposes:

- We may use or share your information with the employer or other health-plan sponsor through which you receive your health benefits. We will not share individually identifiable health information with your benefits plan unless they promise
to keep it protected and use it only for purposes relating to the administration of your health benefits.

- We may share your information with a health plan, provider, or health care clearinghouse that participates with us in an organized health care arrangement. We will only share your information for health care operations activities associated with that arrangement.

- We may share your information with another health plan that provides or has provided coverage to you for payment purposes. We may also share your information with another health plan, provider or health care clearinghouse that has or had a relationship with you for the purpose of quality assessment and improvement activities, reviewing the competence or qualifications of health care professionals, or detecting or preventing health care fraud and abuse.

- We may share your information with a family member, friend, or other person who is assisting you with your health care or payment for your health care. We may also share information about your location, general condition, or death to notify or help notify (including identifying and locating) a person involved with your care or to help with disaster-relief efforts. Before we share this information, we will provide you with an opportunity to object. If you are not present, or in the event of your incapacity or an emergency, we will share your information based on our professional judgment of whether the disclosure would be in your best interest.

**State and Federal Laws Allow Us to Share Information**

There are also state and federal laws that allow or may require us to release your health information to others. We may share your information for the following reasons:

- We may report or share information with state and federal agencies that regulate the health care or health insurance system such as the U.S. Department of Health and Human Services, the New York State Department of Financial Services and the New York State Department of Health.

- We may share information for public health and safety purposes. For example, we may report information to the extent necessary to avert an imminent threat to your safety or the health or safety of others. We may report information to the appropriate authorities if we have reasonable belief that you might be a victim of abuse, neglect, domestic violence or other crimes.

- We may provide information to a court or administrative agency (for example, in response to a court order, search warrant, or subpoena).

- We may report information for certain law enforcement purposes. For example, we may give information to a law enforcement official for purposes of identifying or locating a suspect, fugitive, material witness or missing person.

- We may share information with a coroner or medical examiner to identify a deceased person, determine a cause of death, or as authorized by law. We may also share information with funeral directors as necessary to carry out their duties.

- We may use or share information for procurement, banking or transplantation of organs, eyes or tissue.

- We may share information relative to specialized government functions, such as military and veteran activities, national security and intelligence activities, and the protective services for the President and others, and to correctional institutions and in other law enforcement custodial situations.

- We may report information on job-related injuries because of requirements of your state worker compensation laws.

- Under certain circumstances, we may share information for purposes of research.

**Sensitive Information**

Certain types of especially sensitive health information, such as HIV-related, mental health and substance abuse treatment records, are subject to heightened protection under the law. If any state or federal law or regulation governing this type of sensitive information restricts us from using or sharing your information in any manner otherwise permitted under this Notice, we will follow the more restrictive law or regulation.

**Your Authorization**

Except as described in this Notice of Privacy Practices, and as permitted by applicable state or federal law, we will not use or disclose your personal information without your prior written authorization. We will also not disclose your personal information for the purposes described below without your specific prior written authorization:

- Your signed authorization is required for the use or disclosure of your protected health information for marketing purposes, except when there is a face-to-face marketing communication or when we use your protected health information to provide you with a promotional gift of nominal value.

- Your signed authorization is required for the use or disclosure of your personal information in the event that we receive remuneration for such use or disclosure, except under certain circumstances as allowed by applicable federal or state law.

If you give us written authorization and change your mind, you may revoke your written authorization at any time, except to the extent we have already acted in reliance on your authorization. Once you give us authorization to release your health information, we cannot guarantee that the person to whom the information is provided will not re-disclose the information.

We have an authorization form that describes the purpose for which the information is to be used, the time period during which the authorization form will be in effect, and your right to revoke authorization at any time. The authorization form must be completed and signed by you or your duly authorized representative and returned to us before we will disclose any of your protected health information. You can obtain a copy of this form by calling the Customer Service phone number on the back of your ID card.
Your Rights

The following are your rights with respect to the privacy of your health information. If you would like to exercise any of the following rights, please contact us by calling the telephone number shown on the back of your ID card.

Restricting Your Information

- You have the right to ask us to restrict how we use or disclose your information for treatment, payment or health care operations. You also have the right to ask us to restrict information that we have been asked to give to family members or to others who are involved in your health care or payment for your health care. Please note that while we will try to honor your request, we are not required to agree to these restrictions.

Confidential Communications for Your Information

- You have the right to ask to receive confidential communications of information if you believe that you would be endangered if we send your information to your current mailing address (for example, in situations involving domestic disputes or violence). If you are a minor and have received health care services based on your own consent or in certain other circumstances, you also may have the right to request to receive confidential communications in certain circumstances, if permitted by state law. You can ask us to send the information to an alternative address or by alternative means, such as by fax. We may require that your request be in writing and you specify the alternative means or location, as well as the reason for your request. We will accommodate reasonable requests. Please be aware that the explanation of benefits statement(s) that the Plan issues to the contract holder or certificate holder may contain sufficient information to reveal that you obtained health care for which the Plan paid, even though you have asked that we communicate with you about your health care in confidence.

Inspecting Your Information

- You have the right to inspect and obtain a copy of information that we maintain about you in your designated record set. A “designated record set” is the group of records used by or for us to make benefit decisions about you. This can include enrollment, payment, claims and case or medical management records. We may require that your request be in writing. We may charge a fee for copying information or preparing a summary or explanation of the information and in certain situations, we may deny your request to inspect or obtain a copy of your information. If this information is in electronic format, you have the right to obtain an electronic copy of your health information maintained in our electronic record.

Amending Your Information

- You have the right to ask us to amend information we maintain about you in your designated record set. We may require that your request be in writing and that you provide a reason for your request. We may deny your request for an amendment if we did not create the information that you want amended and the originator remains available or for certain other reasons. If we deny your request, you may file a written statement of disagreement.

Accounting of Disclosures

- You have the right to receive an accounting of certain disclosures of your information made by us for purposes other than treatment, payment or health care operations during the six years prior to your request. We may require that your request be in writing. If you request such an accounting more than once in a 12-month period, we may charge a reasonable fee.

Please note that we are not required to provide an accounting of the following:

- Information disclosed or used for treatment, payment and health care operations purposes.
- Information disclosed to you or following your authorization.
- Information that is incidental to a use or disclosure otherwise permitted.
- Information disclosed to persons involved in your care or other notification purposes.
- Information disclosed for national security or intelligence purposes.
- Information disclosed to correctional institutions or law enforcement officials.
- Information that was disclosed or used as part of a limited data set for research, public health or health care operations purposes.

Collecting, Sharing and Safeguarding Your Financial Information

In addition to health information, the plan may collect and share other types of information about you. We may collect and share the following types of personal information:

- Name, address, telephone number and/or email address;
- Names, addresses, telephone numbers and/or email addresses of your spouse and dependents;
- Your social security number, age, gender and marital status;
- Social security numbers, age, gender and marital status of your spouse and dependents;
- Any information that we receive about you and your family from your applications or when we administer your policy, claim or account;
- If you purchase a group policy for your business, information to verify the existence, nature, location and size of your business.
- We also collect income and asset information from Medicaid, Child Health Plus, Family Health Plus and Healthy New York subscribers. We may also collect this information from Medicare subscribers to determine eligibility for government subsidized programs.
We may share this information with our affiliates and with business associates that perform services on our behalf. For example, we may share such information with vendors that print and mail member materials to you on our behalf and with entities that perform claims processing, medical review and other services on our behalf. These business associates must maintain the confidentiality of the information. We may also share such information when necessary to process transactions at your request and for certain other purposes permitted by law.

To the extent that such information may be or become part of your medical records, claims history or other health information, the information will be treated like health information as described in this notice.

As with health information, we use security safeguards and techniques designed to protect your personal information that we collect, use or disclose in writing, orally and electronically. We train our employees about our privacy policies and practices, and we limit access to your information to only those employees who need it in order to perform their business responsibilities. We do not sell information about our customers or former customers.

**Exercising Your Rights, Complaints and Questions**

- **You have the right to receive a paper copy of this notice upon request at any time.** You can also view a copy of this notice on the Web site. See information at the end of this page. We must abide by the terms of this notice.

- **If you have any questions** or would like further information about this notice or about how we use or share information, you may write to the Corporate Compliance department or call Customer Service. Please see the contact information on this page.

- **If you believe that we may have violated your privacy rights, you may file a complaint.**

We will take no action against you for filing a complaint. Call Customer Service at the telephone number and during the hours of operation listed on this page. You can also file a complaint by mail to the Corporate Compliance Department at the mailing address on this page. You may also notify the Secretary of the U.S. Department of Health and Human Services.

We will notify you in the event of a breach of your unsecured protected health information. We will provide this notice as soon as reasonably possible, but no later than 60 days after our discovery of the breach, or as otherwise required by applicable laws, regulations or contract.

**Contact Information**

Please check the back of your ID card to call us or use the following contact information for your plan. Read carefully to select the correct Customer Service number.

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**Write to:**
Corporate Compliance Dept. P.O. Box 2878
New York, NY 10116-2878

**Call:**

- **EmblemHealth program members:** 7 days a week, 8 am-8 pm, 1-877-842-3625, TTY: 711

- **EmblemHealth Medicare members:** 7 days a week, 8 am-8 pm
  - PPO: 1-866-557-7300, TTY: 711
  - HMO: 1-877-344-7364, TTY: 711
  - PDP (City of NY Retirees): 1-800-624-2414, TTY: 711
  - PDP (non-City of NY Retirees): 1-877-444-7241, TTY: 711

- **FIDA members:** 7 days a week, 8 am-8 pm, 1-855-283-2148, TTY: 711

- **GHI members:** 7 days a week, 8 am-8 pm, 1-800-624-2414, TTY: 711

- **HIP “GHI HMO” plan members:** 7 days a week, 8 am-8 pm, 1-877-244-4466, TTY: 711

- **HIP/HIPIC members:** 7 days a week, 8 am-8 pm, 1-800-447-8255, TTY: 711

- **Medicaid, Family Health Plus and Child Health Plus members:** 7 days a week, 8 am-8 pm, 1-855-283-2146, TTY: 711

- **Select Care HMO members:** 7 days a week, 8 am-8 pm, 1-888-447-7703, TTY: 711

**Personal Information After You Are No Longer Enrolled**

Even after you are no longer enrolled in any plan, we may maintain your personal information as required by law or as necessary to carry out plan administration activities on your behalf. Our policies and procedures that safeguard that information against inappropriate use and disclosure still apply if you are no longer enrolled in the Plan.

**Changes to this Notice**

We are required to abide by the terms of this Notice of Privacy Practices as currently in effect. We reserve the right to change the terms of the notice and to make the new notice effective for all the protected health information that we maintain. Prior to implementing any material changes to our privacy practices, we will promptly revise and distribute our notice to our customers. In addition, for the convenience of our members, the revised privacy notice will also be posted on our Web site: [www.emblemhealth.com](http://www.emblemhealth.com).