


**The California State University
Office of the Chancellor
401 Golden Shore
Long Beach, CA 90802-4210
(562) 951-4411**

Date: July 15, 2003

Code: HR 2003-14

To: CSU Presidents

From: Jackie R. McClain 
Vice Chancellor
Human Resources

Subject: **HIPAA Regulations – Privacy Compliance**

The Office of General Counsel has determined that the California State University's (CSU) benefit plans are required to comply with the Health Care Portability and Accountability Act of 1996 (HIPAA) Title II regulations, issued by the Federal Department of Health and Human Services (DHHS). Compliance regulations vary with the particular benefit plan and the CSU's involvement in plan administration functions. This is to inform campuses of the various privacy regulations HIPAA imposes on the CSU and its benefit plan providers. Compliance with privacy regulations was effective April 14, 2003. An Executive Order will be forthcoming on this subject from the Chancellor.

HIPAA Background

HIPAA's Title II requirements cover the privacy and security of individual health information used, transmitted, and retained by employer health plans and other covered entities, and the electronic transmission of certain health data. This information is known as protected health information (PHI). There are three main sets of HIPAA regulations, each part with differing effective dates.

HIPAA Regulations	Description	Effective Dates
Privacy	Rules that safeguard privacy of health information by placing limits on accessibility and dissemination of patient information.	April 14, 2003, unless meets "small plan rule" then April 14, 2004.

Distribution:

Vice Presidents, Administration
Associate Vice Presidents/Deans of Faculty
Human Resources Directors
Benefits Officers
Payroll Managers

Electronic Data Interchange (EDI)	Rules that standardize transactions/code sets for electronic data interchange to encourage electronic commerce in healthcare.	October 16, 2003
Security	Rules that maintain confidentiality and data integrity, prevent unauthorized use of data, and guard against physical hazards.	April 21, 2005

Privacy Regulations

- ❖ CSU's sponsored health plans (medical, dental, and vision) are subject to the HIPAA privacy regulations effective April 14, 2003. The Health Care Reimbursement Account (HCRA) and possibly some campus Employee Assistance Programs (EAPs) will be subject to the regulations April 14, 2004.
- ❖ HIPAA does not affect CSU's treatment of health-related information that is acquired through ordinary human resources operations (i.e., enrollment and disenrollment in benefit plans, fitness for duty examinations, medical restrictions, and accommodations for disabilities) and is used for ordinary human resources operations.
- ❖ The privacy regulations do affect the scope of information that the benefit plan providers (i.e., CalPERS medical, Delta, PMI and CPIC/MES) can disclose to the CSU beyond summary health information and enrollment and disenrollment information.
- ❖ HIPAA privacy regulations will be enforced by the Federal DHHS Office of Civil Rights through complaints and selected audits. Civil and criminal penalties can be enforced.
- ❖ CSU staff dealing with PHI must be trained regarding HIPAA policies and procedures, safeguard it against intentional or accidental misuse, disclose only the minimum necessary amount of information, and are prohibited from retaliating against participants who file a complaint.
- ❖ CSU participants have the right to receive privacy notices, inspect a copy of their PHI, amend PHI, request restricted use of PHI, receive an accounting of non-routine disclosures of their PHI and file a complaint about privacy violations.

What HIPAA Privacy Regulations Mean to the Campuses

We do understand that campus and Chancellor's Office human resources offices may need PHI when advocating on an employee's behalf with benefit providers. HIPAA privacy regulations do impact these types of activities. These situations include employees requesting assistance on claims that have not been paid, questions regarding plan coverage, and requests for assistance with specific medical conditions. CSU may continue to receive necessary PHI from benefit plan providers if the employee provides written authorization for the benefit provider to disclose it. Note that required disclosure of personal health information requested as part of disability leave, workers' compensation, or other life or disability benefits is not covered under HIPAA privacy rules.

What is the CSU doing to comply with HIPAA Privacy Regulations?

- ❖ Benefit plan providers subject to HIPAA privacy regulations have notified CSU participants of the regulations through direct mailings to participants' home addresses. CalPERS notified plan participants of HIPAA privacy requirements in the 2002 open enrollment materials. Delta, PMI and CPIC/MES recently mailed notifications to CSU participants (both active and retirees).
- ❖ The CSU's Health Care Reimbursement Account (HCRA) plan and possibly campus-sponsored Employee Assistance Plans (EAP) meet HIPAA's "small plan rule" and have until April 14, 2004 to comply with privacy regulations. Participants will be notified of HIPAA privacy regulations at a later date prior to next year's deadline. We are in the process of surveying each campus in order to determine which, if any, campus-sponsored EAP must comply with HIPAA privacy regulations.
- ❖ An overview of the HIPAA privacy regulations and their impact on campus human resources offices was given via teleconference on May 21, 2003, by the systemwide Human Resources Office and Mercer Human Resources Consulting. *The audio conference materials are attached for your campus' reference.*
- ❖ A HIPAA Internal Operations Survey has been given to 10 campuses to determine how HIPAA regulations may impact human resources operations at campuses and the Chancellor's Office. This survey will be used to conduct future HIPAA training and the development of the CSU HIPAA privacy manual.
- ❖ In depth HIPAA training will be conducted at the annual Benefit Officers' Workshop on August 5, 2003. A sample of a HIPAA privacy manual will be provided at that time. A CSU specific HIPAA privacy manual will be provided to the campuses soon thereafter.
- ❖ *A participant authorization form is attached for use when an employee's authorization is needed by the campus to use PHI for purposes deemed necessary by HIPAA privacy regulations.* This authorization is to be used for all CSU sponsored health plans including CalPERS medical, Delta/PMI dental, and CPIC/MES vision. In order to obtain PHI from a CSU sponsored benefit provider, an authorization must be obtained from the employee and submitted to that provider.
- ❖ *Also attached is a HIPAA Privacy Notice for distribution to new employees.* As instructed in the audio conference on May 21, 2003, campuses are requested to provide all new CSU employees with a Privacy Notice. This Privacy Notice has been written to apply to all CSU sponsored benefit plans. While the benefit providers are responsible for the distribution of their own privacy notices, campuses will be responsible for providing this multi benefit plan Privacy Notice to newly hired employees. This notice may be made available to new employees electronically or in hard copy.

If you have questions, please call Human Resources Administration at (562) 951-4411. This memorandum is also available on the Human Resources Administration's web site at: <http://www.calstate.edu/HRAdm/memos.shtml>.

JRMcC/br

Attachments

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MERCER

Human Resource Consulting



May 21, 2003

HIPAA Privacy Overview

Presented to the California State University



MMC Marsh & McLennan Companies

Agenda

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- Introduction
- HIPAA privacy regulations
- HIPAA privacy impact on CSU
- Next steps/action items

HIPAA Privacy Regulations

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What is HIPAA Privacy?

- The Health Insurance Portability and Accountability Act of 1996 (HIPAA) – Title 2 Administrative Simplification
 - Privacy (our focus today)
 - Electronic Data Interchange
 - Security
- The HIPAA privacy regulations are effective April 14, 2003 and cover the privacy and security of individual medical information used, transmitted or retained by employer sponsored health plans and other covered entities
- The HIPAA privacy regulations will be enforced by the HHS Office of Civil Rights through complaints and selected audits
 - Civil Penalties – Up to \$25K per standard
 - Criminal Penalties – Fines up to \$250K per standard and 10 years in prison
 - Other Penalties – Private lawsuits under state law or ERISA

HIPAA Privacy Regulations

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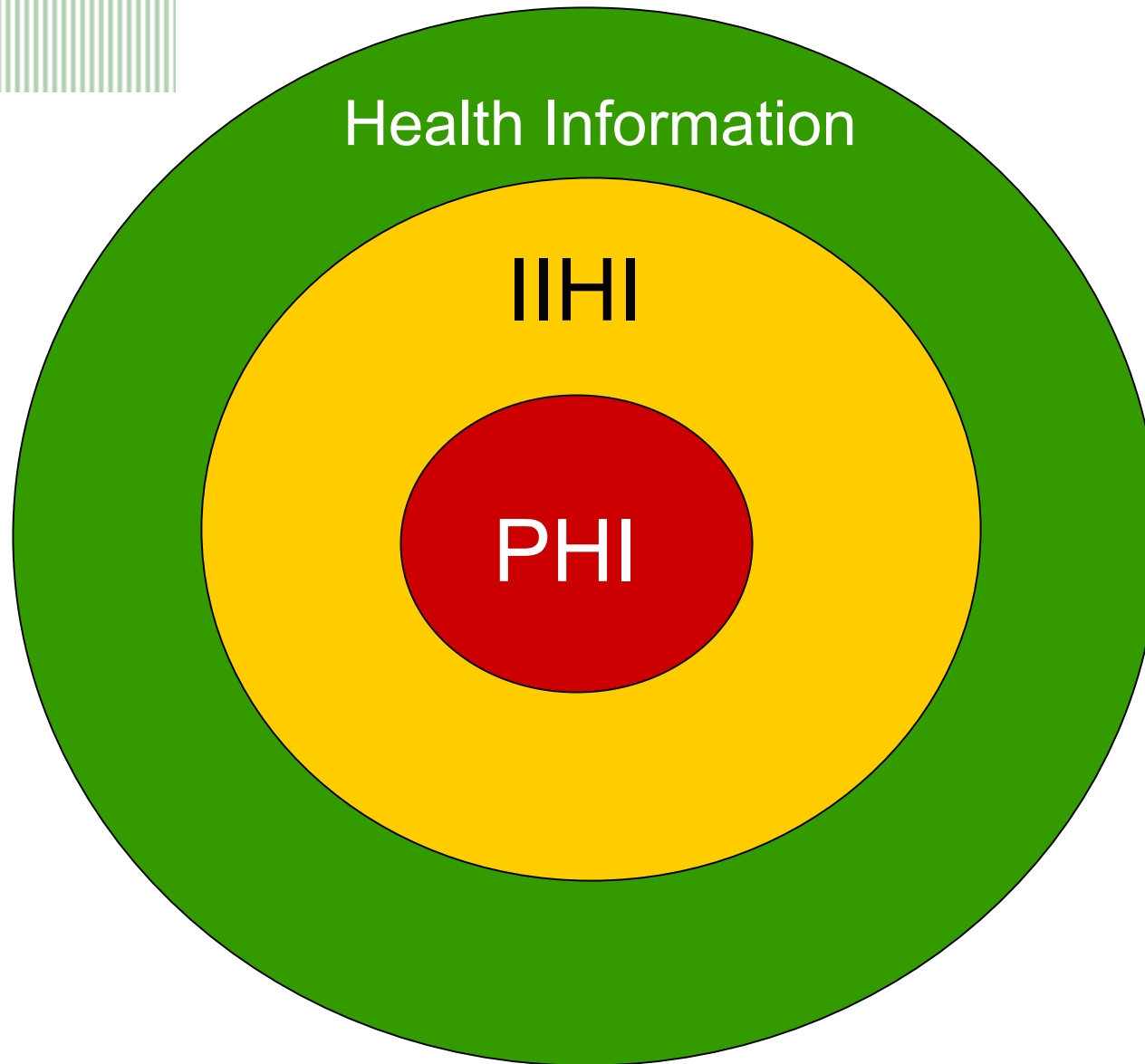


What information is protected under the HIPAA privacy regulations?

- Protected Health Information (PHI) is any health information that is:
 - Individually identifiable (reasonable basis to believe information could identify individual) and related to the individual's physical, mental or other condition, the provision of health care to the individual, or the payment of health care for the individual
 - Created, maintained, transmitted or received by a health provider, health plan, clearinghouse, or employer in its health care capacity
 - In any medium – written, electronic or verbal
- Does not include personal medical information that is obtained by employer for employment purposes
 - Compliance with FMLA, ADA, worker's compensation, administration of sick leave, etc.

What is PHI?

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HIPAA Privacy Regulations

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The HIPAA privacy regulations apply to covered entities.

- What is a covered entity?
 - Health plans (e.g., health insurers, HMOs, employer-sponsored health plans)
 - CSU sponsored health plans, including the Health Care Reimbursement Account (HCRA) Plan and possibly campus employee assistance programs (EAP)
 - Health care providers that transmit health data electronically
 - Health care clearinghouses
- What is a health plan?
 - “Health plan” is broadly defined – an arrangement that provides (or pays the cost of) health care. CSU is a plan sponsor of a number of health plans as follows:
 - Medical and prescription drug plans (PERS Health Care Providers)
 - Dental plans (Delta Dental and PMI)
 - Vision Plans (CPIC Life)
 - Health care flexible spending arrangements (HCRA)
 - Employee assistance plans that provide counseling (maybe some campus EAPs)

HIPAA Privacy Regulations

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- What is not a covered entity?
 - Employers*
 - Third party administrators*
 - Disability, Workers' Compensation and Life Insurance Plans
- * *But the HIPAA regulations make it clear that employers and their TPAs may be affected based on their roles as plan sponsors and business associates*
Employers will be responsible for their employees who handle individual health information when they help with the administration of the employer sponsored health plans (e.g., customer service) compliance with the HIPAA privacy regulations

HIPAA Privacy Regulations

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What is a business associate?

- Entity that performs functions for or provides services to a health plan or other covered entity
- Includes: FSA administrators, claims administrators, utilization management vendors, pharmacy benefit managers, consultants, attorneys, auditors, etc.
- May include COBRA administrators
- Does not include insurers and HMOs, because they are covered entities under HIPAA

HIPAA Privacy Regulations

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What are key requirements of the HIPAA privacy regulations?

- Covered entities must establish a privacy policy and structure, including restrictions on use or disclosure of PHI without participant authorization
 - Applies to both fully-insured health plans and self-funded health plans (i.e., flexible spending accounts).
- Business associates must abide by the HIPAA privacy regulations in storing, maintaining, or transmitting PHI in any form
 - Employers/plan sponsors will generally be responsible for ensuring that business associates comply with HIPAA's privacy regulations through contractual agreements
- Individuals have certain rights concerning their PHI

HIPAA Privacy Impact on CSU

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Who is considered the covered entity?

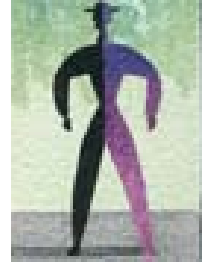
- CSU sponsored health plans (including the fully-insured plans, HCRA and possibly, the EAPs) and CSU's health care insurance carriers are covered entities under the HIPAA privacy regulations

When do CSU's health plans and health care insurance carriers have to comply with the HIPAA privacy regulations?

- Both HCRA and campus EAPs fall under the HIPAA "small plan rule" and are not required to comply with HIPAA privacy regulations until April 14, 2004
- Not all campus EAPs may be subject to HIPAA regulations. Further review is required.
- The remainder of CSU's health plans and CSU's health care insurance carriers must comply with the HIPAA privacy regulations by April 14, 2003

HIPAA Privacy Impact on CSU

What are the general HIPAA privacy protocols?



- CSU staff members handling PHI must safeguard it against intentional or accidental misuse
- CSU staff members handling PHI may access or disclose only the “minimum necessary” amount of information to accomplish the task at hand
- CSU staff members handling PHI will be trained regarding CSU HIPAA policies and procedures
- PHI will be subject to CSU HIPAA policies and procedures, as well as to applicable participant notices
- Plan participants will have certain rights regarding their own PHI
- CSU staff members who violate CSU HIPAA policies and procedures that protect PHI will be sanctioned
- CSU staff members are prohibited from retaliating against participants who file a complaint or otherwise exercise their privacy rights under HIPAA
- Only certain CSU staff members will be permitted to handle PHI
- Under certain circumstances, CSU staff members handling PHI must obtain a participant’s authorization before using or disclosing the participant’s PHI (e.g., claim advocacy)

HIPAA Privacy Impact on CSU

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Important campus human resources activities impacted by the HIPAA privacy regulations

- Claims advocacy
- Participant requests for assistance with specific medical conditions
- Certain questions regarding a participant's medical coverage

In most cases, CSU staff members will need to obtain a participant's authorization to obtain PHI from CSU's health plans, business associates or health care insurance carriers.

HIPAA Privacy Impact on CSU

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How can CSU staff members ensure PHI remains confidential?

- Funnel incoming mail and faxes through distinct channels to limit access to PHI
- Limit the number of photo copies made of documents containing PHI
- Implementing “clean desk” policy
- Lock all files when not in use
- Do not keep fax machines, computer equipment, printers, copiers, manual files where PHI may be received in public areas
- Limit the use of PHI in e-mails and add confidentiality statements to e-mails
- Encrypt information as necessary
- Require password entry for files containing PHI on public servers
- Discuss PHI in areas where you will not be overheard (i.e., behind closed doors)

HIPAA Privacy Impact on CSU

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What are CSU health plan participants' rights regarding their PHI?

- Right to receive privacy notices
- Right to inspect and copy their PHI*
- Right to amend their PHI*
- Right to request restricted use of their PHI (though covered entities need not accept those restrictions)
- Right to receive accounting of non-routine disclosures of their PHI
- Right to file complaints about privacy violations

These rights apply to PHI held by CSU staff members involved in plan administration, business associates, or CSU's health care insurance carriers. Most participant inquiries will be directed to the CSU's health care insurance carriers (i.e., PERS medical, Delta, PMI, CPIC Life).

*Health Plans can deny these requests only under certain circumstances

HIPAA Privacy Impact on CSU

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HIPAA items implemented to date

- CSU health care insurance carriers, subject to HIPAA privacy regulations effective April 14, 2003, have or are in the process of notifying their CSU plan participants of HIPAA privacy regulations
 - This includes all CSU active employees and retirees with CSU sponsored benefits (medical, dental, and vision)
 - PERS, PMI, and CPIC/MES have completed notification to its CSU plan participants
 - Delta Dental is currently in the process of notifying its CSU plan participants
- Chancellor's Office is issuing an Executive Order to govern the California State University's HIPAA compliance obligations

Next Steps/Action Items

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What's Next?

- Systemwide Human Resources Administration to provide electronic copies of the employee PHI authorization form and privacy notices (from each health care insurance carrier) to campuses by early June
- Campus Human Resources staff or CSU's health care insurance carriers to provide newly benefits eligible employees with HIPAA privacy notice upon enrollment
- Systemwide Human Resources Administration to issue a technical letter informing presidents of HIPAA privacy regulations to be issued subsequent to the Executive Order
- Systemwide Human Resources Administration to send an EAP questionnaire in June to campuses in order to determine which campus plans are subject to HIPAA privacy regulations

Next Steps/Action Items

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What's Next?

- Systemwide Human Resources Administration to provide campuses with a CSU HIPAA policy manual by the Benefits Officer's Workshop in August 2003
- Systemwide Human Resources Administration to develop a HIPAA Compliance web site on the Systemwide Human Resources Administration Web Site by the Benefits Officer's Workshop in August 2003
- Systemwide Human Resources Administration and Mercer Human Resource Consulting to conduct HIPAA privacy regulations training at the Benefits Officer's Workshop in August 2003
- CSU to be HIPAA compliant for HCRA and EAPs by April 14, 2004



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The California State University
**Authorization to Use and/or Disclose Personal
Health Plan Information**

		Form Received By	Date
1. Employee Name	1a. Employee Health Plan ID Number		
1b. Employee Date of Birth	1c. Employee Address and Phone Number		
2. Name of Person Whose Health Information is the Subject of this Authorization	2a. Relationship to Employee Self <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Other <input type="checkbox"/>		
3. Your Name	3a. Authority If you are not the person in Box 2, please describe your authority to act on his or her behalf: _____ _____ _____		
4. Mailing Address for Records	4a. City, State, Zip Code		

I hereby authorize _____ [Insert name of the insurance carrier, HMO, health plan vendor or the CSU Group Health and HCRA Plans who will be disclosing the health information] to use and/or disclose the health information described in Sections A — E below.

Section A: Health Information to be Used and/or Disclosed.

Specify the health information to be released and/or used, including (if applicable) the time period(s) to which the information relates. Select only one (1) of the following boxes:

- ☐ All of my health information, including, but not limited to, dates of service, types of service, treatment charts, x-rays, provider notes or other information, related to the following health condition: _____ (please describe).
- ☐ All of my health information relating to Claim Number _____, including, but not limited to, dates of service, types of service, treatment charts, x-rays, provider notes or other information.
- ☐ Other (please specify). _____

Section B: Person(s) Authorized to Use and/or Receive Information.

Specify the persons or class of persons authorized to use and/or receive the health information described in Section A:

Section C: Purposes for Which Information will be Used or Disclosed.

Specify each purpose for which the health information described in Section A may be used or disclosed. Select all of the applicable boxes below:

- ☐ To facilitate the resolution of a claim dispute.
- ☐ As part of my application for leave of under the Family and Medical Leave Act (FMLA) or state family leave laws.
- ☐ For a disability coverage determination.
- ☐ At my request.
- ☐ Other (please specify) _____

Section D: Expiration of Authorization

Specify when this Authorization expires. (Provide a date or triggering event related to the use or disclosure of the information.)

- ☐ On the following date: _____.
- ☐ Upon the passage of the following amount of time: _____.
- ☐ Upon my disenrollment from the CSU Group Health and HCRA Plans.
- ☐ Upon my return from FMLA leave.
- ☐ Other (please specify) _____

Your rights:

- You can revoke this Authorization at any time by submitting a written revocation to the campus benefits office.
- A revocation will not apply to information that has already been used or disclosed in reliance on the Authorization.
- Once the information is disclosed pursuant to this Authorization, it may be redisclosed by the recipient and the information will no longer be protected by HIPAA.
- The Plan may not condition treatment, payment, enrollment or eligibility for benefits on whether I sign the Authorization.
- You will be provided with a copy of this Authorization Form, after signing, if the Plan sought the Authorization.

Signature of Participant

Date



The California State University

PRIVACY NOTICE

This notice describes how medical information about you may be used and disclosed and how you can access this information. Please review it carefully.

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) imposes numerous requirements on employer health plans concerning the use and disclosure of individual health information. This information, known as protected health information (PHI), includes virtually all individually identifiable health information held by a health plan — whether received in writing, in an electronic medium, or as an oral communication. This notice describes the privacy practices of the group health plans sponsored by California State University (CSU). The group health plans covered by this notice may share health information with each other to carry out Treatment, Payment, or Health Care Operations. These plans are collectively referred to as the “Plan” in this notice, unless specified otherwise.

The Plan’s duties with respect to health information about you

The Plan is required by law to maintain the privacy of your health information and to provide you with this notice of the Plan’s legal duties and privacy practices with respect to your health information. If you participate in the insured dental and vision plans, or in the health plans offered through CalPERS, you will receive a notice directly from the insurer, HMO, or CalPERS. It’s important to note that these rules apply to the Plan, not CSU as an employer — that is the way the HIPAA rules work. Different policies may apply to other CSU programs or to data unrelated to the health plan.

How the Plan may use or disclose your health information

The privacy rules generally allow the use and disclosure of your health information without your permission (known as an authorization) for purposes of health care Treatment, Payment activities, and Health Care Operations. Here are some examples of what that might entail:

- **Treatment** includes providing, coordinating, or managing health care by one (1) or more health care providers or doctors. Treatment can also include coordination or management of care between a provider and a third party, and consultation and referrals between providers. *For example, the Plan may share health information about you with physicians who are treating you.*
- **Payment** includes activities by this Plan, other plans, or providers to obtain premiums, make coverage determinations and provide reimbursement for health care. This can include eligibility determinations, reviewing services for medical necessity or appropriateness, utilization management activities, claims management, and billing; as well as “behind the scenes” plan functions such as risk adjustment, collection, or reinsurance. *For example, the Plan may share information about your coverage or the expenses you have incurred with another health plan in order to coordinate payment of benefits.*

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- **Health care operations** include activities by this Plan (and in limited circumstances other plans or providers) such as wellness and risk assessment programs, quality assessment and improvement activities, customer service, and internal grievance resolution. Health care operations also include vendor evaluations, credentialing, training, accreditation activities, underwriting, premium rating, arranging for medical review and audit activities, and business planning and development. *For example, the Plan may use information about your claims to review the effectiveness of wellness programs.*

The amount of health information used or disclosed will be limited to the “Minimum Necessary” for these purposes, as defined under the HIPAA rules. The Plan may also contact you to provide appointment reminders or information about treatment alternatives or other health-related benefits and services that may be of interest to you.

How the Plan may share your health information with CSU

The Plan, or its health insurers, business associates, CalPERS or HMOs, may disclose to CSU the following health information without your written authorization:

- The Plan, or its insurers, business associates, CalPERS or HMOs, may disclose “summary health information” to CSU if requested, for purposes of obtaining premium bids to provide coverage under the Plan, or for modifying, amending, or terminating the Plan. Summary health information is information that summarizes participants’ claims information, but from which names and other identifying information have been removed.
- The Plan, or its insurers, business associates, CalPERS or HMOs, may disclose to CSU information on whether an individual is participating in the Plan, or has enrolled or disenrolled in an option offered by the Plan.

In addition, the Plan, its insurers, business associates, CalPERS or HMOs, may disclose your health information without your written authorization to CSU for plan administration purposes, if CSU adopts Plan amendments describing its administration activities.

CSU cannot and will not use health information obtained from the Plan for any employment-related actions. However, health information collected by CSU from other sources, for example under the Family and Medical Leave Act, Americans with Disabilities Act, or workers’ compensation is *not* protected under HIPAA (although this type of information may be protected under other federal or state laws).

Other allowable uses or disclosures of your health information

In certain cases, your health information can be disclosed without authorization to a family member, close friend, or other person you identify who is involved in your care or payment for your care. Information describing your location, general condition, or death may be provided to a similar person (or to a public or private entity authorized to assist in disaster relief efforts). You’ll generally be given the chance to agree or object to these disclosures (although exceptions may be made, for example if you are not present or if you are incapacitated). In addition, your health information may be disclosed without authorization to your legal representative.

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The Plan is also allowed to use or disclose your health information without your written authorization for uses and disclosures required by law, for public health activities, and other specified situations, including:

- Disclosures to Workers' Compensation or similar legal programs, as authorized by and necessary to comply with such laws
- Disclosures related to situations involving threats to personal or public health or safety
- Disclosures related to situations involving judicial proceedings or law enforcement activity
- Disclosures to a coroner or medical examiner to identify the deceased or determine cause of death; and to funeral directors to carry out their duties
- Disclosures related to organ, eye or tissue donation, and transplantation after death
- Disclosures subject to approval by institutional or private privacy review boards and subject to certain assurances by researchers regarding necessity of using your health information and treatment of the information during a research project
- Certain disclosures related to health oversight activities, specialized government or military functions and Health and Human Services investigations

Except as described in this notice, other uses and disclosures will be made only with your written authorization. You may revoke your authorization as allowed under the HIPAA rules. However, you can't revoke your authorization if the Plan has taken action relying on it. In other words, you can't revoke your authorization with respect to disclosures the Plan has already made.

Your individual rights

You have the following rights with respect to your health information the Plan maintains. These rights are subject to certain limitations, as discussed below. This section of the notice describes how you may exercise each individual right. See the "Contract" section of this notice for information on how to submit requests.

Right to request restrictions on certain uses and disclosures of your health information and the Plan's right to refuse

You have the right to ask the Plan to restrict the use and disclosure of your health information for Treatment, Payment, or Health Care Operations, except for uses or disclosures required by law. You have the right to ask the Plan to restrict the use and disclosure of your health information to family members, close friends, or other persons you identify as being involved in your care or payment for your care. You also have the right to ask the Plan to restrict use and disclosure of health information to notify those persons of your location, general condition, or death — or to coordinate those efforts with entities assisting in disaster relief efforts. If you want to exercise this right, your request to the Plan must be in writing.

The Plan is not required to agree to a requested restriction. If the Plan does agree, a restriction may later be terminated by your written request, by agreement between you and the Plan (including an oral agreement), or unilaterally by the Plan for health information created or received after you're notified that the Plan has removed the restrictions. The Plan may also disclose health information about you if you need emergency treatment, even if the Plan has agreed to a restriction.

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Right to receive confidential communications of your health information

If you think that disclosure of your health information by the usual means could endanger you in some way, the Plan will accommodate reasonable requests to receive communications of health information from the Plan by alternative means or at alternative locations.

If you want to exercise this right, your request to the Plan must be in writing and you must include a statement that disclosure of all or part of the information could endanger you. This right may be conditioned on you providing an alternative address or other method of contact and, when appropriate, on you providing information on how payment, if any, will be handled.

Right to inspect and copy your health information

With certain exceptions, you have the right to inspect or obtain a copy of your health information in a “Designated Record Set.” This may include medical and billing records maintained for a health care provider; enrollment, payment, claims adjudication, and case or medical management record systems maintained by a plan; or a group of records the Plan uses to make decisions about individuals. However, you do not have a right to inspect or obtain copies of psychotherapy notes or information compiled for civil, criminal, or administrative proceedings. In addition, the Plan may deny your right to access, although in certain circumstances you may request a review of the denial. If you want to exercise this right, your request to the Plan must be in writing.

If the Plan doesn’t maintain the health information but knows where it is maintained, you will be informed of where to direct your request.

Right to amend your health information that is inaccurate or incomplete

With certain exceptions, you have a right to request that the Plan amend your health information in a Designated Record Set. The Plan may deny your request for a number of reasons. For example, your request may be denied if the health information is accurate and complete, was not created by the Plan (unless the person or entity that created the information is no longer available), is not part of the Designated Record Set, or is not available for inspection (e.g., psychotherapy notes or information compiled for civil, criminal, or administrative proceedings). If you want to exercise this right, your request to the Plan must be in writing, and you must include a statement to support the requested amendment.

Right to receive an accounting of disclosures of your health information

You have the right to a list of certain disclosures the Plan has made of your health information. This is often referred to as an “accounting of disclosures.” You generally may receive an accounting of disclosures if the disclosure is required by law, in connection with public health activities, or in similar situations listed in the “Other allowable uses or disclosures of your health information” section of this notice, unless otherwise indicated below. You may be entitled to an accounting of disclosures that the Plan should not have made without authorization.

You may receive information on disclosures of your health information going back for six (6) years from the date of your request, but not earlier than April 14, 2003 (the general date that the HIPAA privacy rules are effective). You do not have a right to receive an accounting of any disclosures made:

- For Treatment, Payment, or Health Care Operations;
- To you about your own health information;
- Incidental to other permitted or required disclosures;
- Where authorization was provided;
- To family members or friends involved in your care (where disclosure is permitted without authorization);
- For national security or intelligence purposes or to correctional institutions or law enforcement officials in certain circumstances; or
- As part of a “limited data set” (health information that excludes certain identifying information).

In addition, your right to an accounting of disclosures to a health oversight agency or law enforcement official may be suspended at the request of the agency or official.

If you want to exercise this right, your request to the Plan must be in writing. You may make one (1) request in any 12-month period at no cost to you, but the Plan may charge a fee for subsequent requests. You’ll be notified of the fee in advance and have the opportunity to change or revoke your request.

Right to obtain a paper copy of this notice from the Plan upon request

You have the right to obtain a paper copy of this Privacy Notice upon request. Even individuals who agreed to receive this notice electronically may request a paper copy at any time by contacting your campus benefits office.

Changes to the information in this notice

The Plan must abide by the terms of the Privacy Notice currently in effect. This notice takes effect on April 14, 2003, for all the CSU Group Health Plans (CalPERS medical, dental and vision) except the Health Care Reimbursement Account (HCRA) and any Employee Assistance Plan (EAP) that may be subject to HIPAA. This notice takes effect on April 14, 2004, for the HCRA and any EAP. However, the Plan reserves the right to change the terms of its privacy policies as described in this notice at any time, and to make new provisions effective for all health information that the Plan maintains. This includes health information that was previously created or received, not just health information created or received after the policy is changed. If changes are made to the Plan’s privacy policies described in this notice, you will be provided with a revised Privacy Notice directly from your insurer, HMO or CalPERS. New CSU employees may also receive an updated version from their campus benefits office.

Complaints

If you believe your privacy rights have been violated, you may complain to the Plan and to the Secretary of Health and Human Services. You won’t be retaliated against for filing a complaint. To file a complaint, please contact the applicable insurance carrier, HMO, or CalPERS.

Contact

For more information on the Plan’s privacy policies or your rights under HIPAA, contact the benefits officer on your campus at _____.