

# Privacy

*LifeSolutions* privacy statement outlines the rights of our prospective, current and former members concerning the privacy of their protected health information. Under the Federal Health Insurance Portability and Accountability Act (HIPAA), there are now very strict requirements on how providers involved in providing your health care handle your protected health information (PHI). One of the provisions of these federal rules is the requirement that you be provided with a detailed explanation of how your PHI is protected and the rights that you have concerning the privacy of your PHI.

**While there are no federal guidelines relating to whether an employee assistance program (EAP) falls within HIPAA guidelines, *LifeSolutions* defers to an adherence of these guidelines to help insure your privacy**

- **PHI** is the term used in the federal rules to refer to any information that is contained in files or records that a doctor, hospital, or health plan involved in your health care have that can link or identify that information as belonging to you. These "identifiers" include information such as your name, address, Social Security number, ID numbers, or other unique identifiers. For doctors and hospitals, your PHI is found in things such as medical records and clinical charts. For an EAP such as *LifeSolutions*, your PHI is found in records such as enrollment records, clinical care notes (if you receive counseling or coaching services and referrals made to our offices).

**Use and disclosure of your PHI for treatment, payment, and health care operations**

- According to the federal law, your PHI can be used or disclosed only by those people or companies that are subject to the HIPAA Privacy Rules for three very specific purposes: treatment, payment, and health care operations. These are often referred to as "TPO." The following are ways that EAP Solutions will use or disclose your PHI:

## Treatment

While treatment primarily means the care and services provided to you by your doctors and hospitals, there are certain activities that *LifeSolutions* performs that come under this definition. A few examples may include:

- Providing counseling or coaching services in-person or on the telephone
- Consultation with another care provider
- Signed consent made by you to discuss your compliance with care if you are mandatorily referred to *LifeSolutions* by your employer

## Payment

There are payment activities that *LifeSolutions* performs, but these are generally limited to payment of claims to network providers who may provide care for you in person.

## Health Care Operations

This is a term that refers to a wide range of activities that we need to do to administer our health plan and to assure that we are providing you with quality care. Examples of these operations include the following:

- We may use your PHI in measuring and evaluating how effective our services were such as in your completion of a survey about your care
- We may use or share your information to give you or your physician information about the status of your counseling and coaching
- We also might call you or contact you to remind you about an appointment
- Please remember that we use your PHI only for the activities involved in treatment, payment, and operations. Furthermore, when we use your PHI, we do our best to use only the minimum necessary for the job at hand.

**Disclosure is different than use.** To **disclose** your information means that we **share** it with someone outside of our company.

We disclose your PHI only for treatment, payment, or operations, either

- With others who are subject to these Privacy Rules who are also involved in your health care
- Or with those vendors, agents, or subcontractors with whom we have contracted to assist us in providing your *LifeSolutions* services.
- In all cases of releasing information, *LifeSolutions* also adheres to federal, state and professional requirements and strives to obtain your signed release of information before sharing any PHI.

**Other Uses and Disclosures Not Requiring Consent or Authorization**

- In addition to the disclosures for treatment, payment and health care operations described above, the law provides we may use/disclose your medical information without your written consent or authorization in certain circumstances including:
  - When required by federal, state or local law
  - For public health activities such as the need to report child or elder abuse or neglect
  - Involvement in a lawsuit or dispute and where we are required to respond to a court or administrative order. In this situation, only the information expressly authorized by the order will be disclosed.
  - Requests by law enforcement through a formal court order
  - Serious threats to the health and safety of yourself or others