

PRIVACY POLICY
Effective April 13, 2003

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

The Southwest Ohio Regional Council of Carpenters Health Plan (Plan) generally treats your medical information as confidential. However, the Plan must use and disclose medical information to others for payment and for health care operations. Medical information may be disclosed for the Plan's purchase of insurance, or if there may be duplicate coverage requiring coordination of benefits. Information may be disclosed to utilization review groups, and you and/or your medical providers may be contacted about treatment alternatives and health-related benefits. Protected health information is sometimes disclosed to the Plan Sponsor and Plan Administrator for Plan administration—for example, to act on claim appeals.

The Plan is generally required to disclose health information to you, and when required by the Secretary of Health and Human Services to determine Plan compliance. The Plan is also permitted and may be required to disclose information to public health agencies to satisfy certain reporting requirements, such as births and deaths, certain communicable diseases, child abuse, and other public health issues; to health oversight agencies, such as governmental auditors, a State Department of Health, and other agencies when required; to any individual when ordered by a court or other legal process to do so; to law enforcement officials when necessary for law enforcement purposes and required by law; to a coroner or medical examiner when necessary to enable them to perform their duties; to organ procurement organizations, to enable them to make suitability determinations; in cases of emergency; for workers' compensation; incident to a permitted or required use or disclosure; and where direct identifiers are excluded.

For uses and disclosures not permitted or required (for example, use of psychotherapy notes), the Plan will seek your written authorization. You may generally revoke that authorization.

Your Rights

For your private health information, you have certain rights:

- To request restrictions on certain uses and disclosures (but the Plan is not required to agree);
- To request communications by alternative means or at alternative locations stated in writing;
- To generally inspect and copy such information (for a reasonable fee);
- To request amendment of information if you furnish your reason in writing;
- To receive an accounting of certain uses and disclosures other than those to carry out treatment, payment or health operations; and
- To receive a copy of this Privacy Policy upon request.

You may exercise the above rights by writing to the Privacy Contact at the address shown below.

Our Obligations

This Plan must:

- maintain the privacy of protected health information;
- furnish you with the Plan's Privacy Policy, and act in accordance with this Policy; and
- notify you in writing of a change in this Privacy Policy, which change may be effective for protected health information received before the change.

You should contact the Privacy Officer at the Fund Office at (800) 635-1524 for further information or to express any concerns. If the matter is not resolved or you believe your privacy rights have been violated, you should file a written complaint with the Privacy Contact, Southwest Ohio Regional Council of Carpenters, 204 North Garver Road, Monroe, Ohio 45050. If the matter is not resolved within 30 days of your complaint, you should file a written complaint with the Board of Trustees, Southwest Ohio Regional Council of Carpenters Health and Welfare Plan c/o Compensation Programs of Ohio, Inc., 33 Fitch Boulevard, Austintown, Ohio 44515. You will not be retaliated against for any complaint. You may also file a complaint with the Secretary of Health and Human Services.