The Lafayette College Group Health Plan (the “Group Health Plan”) is a fully insured group health plan sponsored by Lafayette College (the “Plan Sponsor”). The Group Health Plan provides benefits solely through an insurance contract with a health insurance issuer or health maintenance organization (“Insurer”). The Group Health Plan and the Plan Sponsor intend to comply with the requirements of 45 CFR § 164.530(k) so that the Group Health Plan is not subject to most of HIPAA’s privacy requirements. The Insurer, however, is subject to HIPAA’s privacy rules.

I. No Access to Protected Health Information (PHI) Except for Summary Health Information for Limited Purposes and Enrollment/Disenrollment Information

Neither the Group Health Plan nor the Plan Sponsor (or any member of the Plan Sponsor’s workforce) shall create or receive protected health information (PHI) as defined in 45 CFR § 160.103 except for the following:

(1) summary health information, as defined by HIPAA’s privacy rules, for purposes of (a) obtaining premium bids or (b) modifying, amending, or terminating the Group Health Plan;

(2) enrollment and disenrollment information concerning the Group Health Plan which does not include any substantial clinical information; or

(3) PHI disclosed to the Group Health Plan and/or Plan Sponsor under a signed authorization that meets the requirements of the HIPAA privacy rules.

II. Insurer for Group Health Plan Will Provide Privacy Notice

The insurer for the Group Health Plan will provide the Group Health Plan’s Notice of Privacy Practices and will satisfy the other requirements under HIPAA’s privacy rules related to Notice of Privacy Practices, including Notices of Availability of the Privacy Practices. The Notice of Privacy Practices, among other things, will notify participants of the potential disclosure of the summary health information and enrollment and disenrollment information to the Group Health Plan and the Plan Sponsor.

III. Breach Notification Requirements

The Group Health Plan will comply with the requirements of the Health Information Technology for Economic and Clinical Health Act (HITECH Act) and its implementing regulations to provide notification to affected individuals, the US Department of Health and Human Services (HHS), and the media (when required), if the Plan or one of its business associates discovers a breach of unsecured PHI.
IV. *No Intimidating or Retaliatory Acts*

The Group Health Plan shall not intimidate, threaten, coerce, discriminate against, or take other retaliatory action against an individual for (1) exercising their rights under the HIPAA rules; (2) participating in any process provided for by the HIPAA rules, including the filing of a complaint; (3) testifying, assisting, or participating in an investigation, compliance review, proceeding, or hearing under the HIPAA regulations; or (4) opposing any act or practice that is illegal under HIPAA, if such individuals have a good faith belief that the practice opposed is unlawful, and the manner of opposition is reasonable and does not involve a disclosure of PHI in violation of the HIPAA regulations.

V. *No Waiver*

The Group Health Plan shall not require an individual to waive his or her privacy rights under HIPAA as a condition of treatment, payment, enrollment, or eligibility for benefits.

VI. *Other Matters*

No third-party rights (including but not limited to rights of Group Health Plan participants, beneficiaries, or covered dependents) are intended to be created by this Policy. The Group Health Plan reserves the right to amend or change this Policy at any time (and even retroactively) without notice. This Policy does not address privacy or other requirements under state law or federal laws other than HIPAA.