April 14, 2008

Copy of Hipaca Privacy Rule. Sunt only When requested L

TO:

ALL ACTIVE AND RETIRED PARTICIPANTS IN THE AFL HOTEL

RESTAURANT WORKERS HEALTH AND WELFARE TRUST FUND

FROM:

BOARD OF TRUSTEES

RE:

HIPAA PRIVACY RULE

The following Notice of Privacy Practices informs you of the AFL Hotel and Restaurant Workers Health & Welfare Trust Fund ("Trust Fund") privacy practices concerning the use and disclosure of your medical information under the Health Insurance Portability and Accountability Act (HIPAA). This Notice became effective on April 14, 2003.

In order to comply with the HIPAA Privacy Rule, the Trust Fund has designated Southwest Service Administrators, Inc. as the Privacy Officer and contact office for the Trust Fund to receive any privacy complaints and provide information to participants regarding their privacy rights under HIPAA.

AFL HOTEL AND RESTAURANT WORKERS **HEALTH AND WELFARE TRUST FUND**

NOTICE OF PRIVACY PRACTICES

Effective Date: April 14, 2003

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED BY THE AFL HOTEL AND RESTAURANT WORKERS HEALTH AND WELFARE TRUST FUND AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Permitted Uses and Disclosures of Your Medical Information:

The AFL HOTEL AND RESTAURANT WORKERS HEALTH AND WELFARE TRUST FUND ("Trust Fund") is required by law to maintain the privacy of your medical information and to provide notice to you of the Trust Fund's legal duties and privacy practices in this regard. The Trust Fund, may use information about your medical condition which constitutes "protected health information" under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), for the purpose of administering and processing any claim for benefits you receive through the Trust Fund. The Trust Fund is required to follow the terms of this notice and any subsequent changes to this notice adopted by the Trust Fund and TO: ALL ACTIVE AND RETIRED PARTICIPANTS IN THE AFL HOTEL & RESTAURANT WORKERS HEALTH & WELFARE TRUST FUND

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any applicable law when using or disclosing any of your medical information that is considered "protected health information" under HIPAA.

The following are examples of how your medical information could be used for purposes of treatment, payment, or health care operations:

(Examples of Treatment)

You file a claim to continue receiving treatment for a specific medical condition. In order to approve the continuation of treatment your medical information must be reviewed as part of the determination whether the continued treatment is medically necessary.

(Examples of Payment)

You file a claim for reimbursement after visiting a non-participating chiropractor. Your claim containing protected health information must be reviewed to process your claim and send you a reimbursement check in the mail.

(Example of Health Care Operations)

Your claim for benefits under the Trust Fund's Comprehensive Medical Plan is denied and you appeal the decision. Your protected health information concerning this claim becomes relevant in the determination on appeal to uphold or reverse the denial of your initial claim.

The Trust Fund or its business associates may also use information about your medical condition without your written consent or authorization in the following cases:

- Where disclosure is required by law and the use or disclosure complies with and is limited to the requirements of the law;
- for certain public health activities;
- to a government authority authorized by law when there is a reasonable belief that an individual is a victim of abuse, neglect or domestic violence
- for health oversight activities authorized by law;
- for certain judicial and administrative proceedings;
- for law enforcement purposes to a law enforcement official under certain circumstances;

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- to organ procurement organizations regarding cadaveric organs, eyes, or tissues for donation purposes;
- to avert a serious threat to health or safety;
- for specialized governmental functions (e.g. separation or discharge from the military, to determine eligibility for veteran health benefits, etc);
- to the extent necessary to comply with workers' compensation or other similar laws.

Any use or disclosure of your medical information by the Trust Fund or its business associates other than for the purposes described above can only be made with your written authorization, which you may revoke at anytime.

Your Rights Regarding Your Medical Information:

As a participant in the Trust Fund you have the right to:

- request restrictions on certain uses and disclosures of your protected health information by the Trust Fund or its business associates, however, the Trust Fund or its business associates is not required to agree to your requested restriction;
- receive confidential communications of protected health information;
- inspect, copy, and amend any protected health information which the Trust Fund or its business associates has access to;
- receive an accounting of disclosures of your protected health information;
- receive a written notice of the Trust Fund's Notice of Privacy Practices from the Trust Fund upon request even if you have previously received this notice electronically.

Revision to the Trust Fund's Privacy Practices:

The Trust Fund reserves the right to change the terms of its Notice of Privacy Practices and it shall have the express right to make the new notice provisions effective for any protected health information the Trust Fund or its business associates maintains. Any revision to the Notice will be communicated through a participant notice.

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Complaints:

If you believe your privacy rights have been violated you may file a complaint with the Trust Fund's Privacy Officer who is Southwest Service Administrators, Inc. at the address listed below. You may also submit a complaint to the Secretary of the U.S. Department of Health and Human Services. No retaliatory action will be taken against you for filing a complaint based on your belief that your privacy rights have been violated.

For further information concerning your privacy rights you may contact:

Privacy Officer
Southwest Service Administrators, Inc.
1221 Kapiolani Boulevard, Suite 6C
Honolulu, HI 96814-3513
Phone: (808) 523-0199

FOR BENEFITS PROVIDED DIRECTLY FROM THE TRUST FUND

(i.e., Comprehensive Medical Plan (Self-Funded), Indemnity Prescription Drug, Indemnity Chiropractic and Indemnity Vision Plans)

For any questions or complaints regarding your medical information and privacy rights under the Comprehensive Medical (Self-funded), Indemnity Prescription Drug, Chiropractic and Vision Plans, contact the following:

For Medical, Drug, Vision, and Chiropractic Claims:

Privacy Officer HMA, Inc. 1440 Kapiolani Blvd., Suite 1020

Honolulu, HI 96814 Phone: (808) 951-4621 For All Self-Funded Benefit Appeals:

Privacy Officer Southwest Service Administrators, Inc. 1221 Kapiolani Blvd., Suite 6C

Honolulu, HI 96814-3513 Phone: (808) 523-0199

FOR BENEFITS PROVIDED THROUGH CARRIERS

(i.e., Kaiser Foundation Health Plan, Hawaii Dental Service, Dental Care Centers of Hawaii, Inc., Employee Assistance of the Pacific, LLC (EAP))

For any questions or complaints regarding your medical information and privacy rights under the Kaiser Foundation Health Plan, Inc. medical and prescription drug plan, the Hawaii Dental Service (HDS) dental plan, or the Dental Care Centers of Hawaii, Inc. (DCCH) dental plan, contact the following:

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Kaiser

Privacy Officer Kaiser Foundation Health Plan Inc. 711 Kapiolani Boulevard Honolulu, Hawaii 96813 Phone: (808) 432-5090

HDS

Privacy Officer Hawaii Dental Service 700 Bishop Street, Suite 700 Honolulu, Hawaii 96813 Phone: (808) 529-9248 (Customer Service)

DCCH

Compliance Officer
Interdent Service Corporation
222 N. Sepulveda Blvd., Suite 740
El Segundo, California 90245-4354
Hawaii Phone: (808) 625-8630 (DCCH Executive Office)

EAP, LLC

Privacy Officer Employee Assistance of the Pacific, LLC 839 South Beretania Street Honolulu, Hawaii 96813 Phone: (808) 531-3271

IF YOU HAVE ANY QUESTIONS REGARDING THIS NOTICE, PLEASE CONTACT the AFL Hotel and Restaurant Workers Health and Welfare Trust Fund's Privacy Officer who is:

Southwest Service Administrators, Inc. 1221 Kapiolani Blvd., Suite 6C Honolulu, HI 96814-3513 Phone: (808) 523-0199

A COPY OF THE HIPAA PRIVACY RULE MAY BE OBTAINED THROUGH THE DEPARTMENT OF HEALTH AND HUMAN SERVICES OFFICE OF CIVIL RIGHTS WEBSITE AT: http://www.dhhs.gov/ocr/hipaa/finalreg.html