

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

If you have any questions about this Notice of Privacy Practices (“Notice”), please contact R & J Insurance Services, LLC (“R & J”) through its Privacy Officer, listed below.

This Notice provides you with information about R & J’s legal duties and privacy practices. R & J is required by federal law to maintain the privacy of Protected Health Information (PHI). PHI is any information that may identify you and that relates to your past, present, or future physical or mental health condition and any related health care services and payment for those health care services. This Notice describes how R & J may use and disclose PHI to carry out treatment, payment, or health care operations or other specified purposes permitted or required by law. The Notice also provides you information about your rights to access, to amend, and control the disclosure of your PHI.

R & J is required to abide by the terms of this Notice, but reserves the right to change the Notice at any time. Any change in the terms of this Notice will be effective for all PHI that R & J maintains at that time. If a change is made to this Notice, a copy of the revised Notice will be provided to customers and clients of R & J at the time of the change.

**EXAMPLES OF HOW PHI MAY BE USED OR DISCLOSED BY R & J**

The following categories describe different ways that R & J may use or disclose your PHI in compliance with state and federal law. The examples of permitted uses and disclosures listed are not provided as an all-inclusive list of the ways in which PHI may be used or disclosed. They are provided to describe in general, the types of uses and disclosures that may be made.

**Treatment, Payment and Health Care Operations**

State and federal law allows R & J to use and disclose PHI for the purposes of treatment, payment, and health care operations, without your consent or authorization. Examples of the uses and disclosures that R & J may make under each section are listed below:

► **Treatment.** Treatment refers to the provision and coordination of health care by a doctor, hospital, or other health care provider. **R & J does not provide treatment.**

► **Payment.** Payment refers to the activities of a Health Plan in collecting premiums and paying claims under a Health Plan for health services. Examples of uses and disclosures under this section include sharing PHI with a third party administrator for claims adjudication and payment; with an internal or external medical review consultant to determine the medical necessity or experimental status of a treatment; with other insurers to determine coordination of benefits or to settle subrogation claims; with a Health Plan or its agents for utilization review activities including precertification and preauthorization or case management services; providing PHI for billing, collection and payment of premiums and fees to Health Plan vendors such as pharmacy benefit managers and reinsurance carriers; or to a reinsurance

carrier to obtain reimbursement of claims paid under a Health Plan. **R & J does not receive payment for providing health care or treatment.**

► Health Care Operations. Health Care Operations refers to the basic business management, planning and development, administrative and quality assurance functions necessary to operate a Health Plan. Examples of uses and disclosures of PHI under this section include disclosure to individuals performing case management or disease management services, to resolve grievances and appeals, conducting quality assessment to evaluate the performance of a Health Plan or a provider or vendor; to determine the cost impact of benefit design changes; to underwriters for the purpose of calculating premium rates and providing reinsurance quotes; for disclosure to stop-loss or reinsurance carriers to obtain claim reimbursements to a Health Plan; disclosure to R & J's consultants who provide legal, actuarial and auditing services to R & J; and use of PHI in general data analysis used in the long term management and planning.

R & J and its Business Associates will use PHI without your consent, authorization or opportunity to agree or object to carry out treatment, payment, and health care operations for these purposes and R & J may also disclose PHI to a Health Plan Sponsor for purposes of treatment, payment, and health care operations.

Other Uses and Disclosures: R & J is permitted to use or disclose your PHI for the following purposes. However, we may never have reason to make some of these disclosures. State and federal law allows R & J to use and disclose PHI, without your authorization, in the following ways:

► To you, as the covered individual. We may use and disclose your PHI to tell you about or recommend possible treatment options or alternatives that may be of interest to you.

► To a personal representative designated by you or a personal representative designated by law such as the parent or legal guardian of a child or the surviving family members or personal representative of the estate of a deceased or incompetent individual.

► To the Secretary of Health and Human Services (HHS) or any employee of HHS as part of an investigation to determine our compliance with the HIPAA Privacy Rules.

► To a Business Associate as part of a contracted agreement to perform services for us. To protect your PHI we require the Business Associate to appropriately safeguard your information.

► To a health oversight agency, such as the Department of Labor (DOL), the Internal Revenue Service (IRS) and state departments of insurance or departments of health. Oversight activities include audits, investigations, inspections, and credentialing activities necessary to obtain permits or licensure or to respond to inquiries or investigations of a Health Plan, its providers or members.

► In response to a court or administrative order, subpoena, discovery request, or other lawful judicial proceeding, but only if an effort has been made to notify you or your legal representative of the request, or to obtain an order of protection for the information.

► As required for law enforcement purposes. For example to notify authorities of a criminal act or to provide PHI necessary for your health or the health and safety of other individuals if you become an inmate of a correctional institution.

► As required to comply with Workers' Compensation or other similar programs established by law.

► To a Health Plan Sponsor, as necessary to carry out administrative functions of a Health Plan such as evaluating renewal quotes for reinsurance of a Health Plan, funding check registers, reviewing claim appeals, performing medical management activities, approving subrogation settlements, and evaluating the performance of a Health Plan.

► In providing you with information about treatment alternatives or other health services that may be of interest to you or as a result of a specific condition that a Health Plan is case managing.

► As required to state or federal agencies or public health officials to prevent a serious threat to your health and safety or the health and safety of the public or another person.

► To military command authorities if you are a member of the armed forces.

► To federal officials for intelligence, counterintelligence, protection to the President, or other national security activities authorized by law.

► To a government authority if there is a reasonable belief that you are a victim of abuse or neglect. We will only disclose this type of information to the extent it is required by law, if you agree to the disclosure, or if the disclosure is allowed by law and we believe it is necessary to prevent serious harm to you or someone else.

#### **ADDITIONAL USES AND DISCLOSURES**

We will obtain your written authorization before using or disclosing your PHI for purposes other than those provided for above (or as otherwise permitted or required by law). You may revoke an authorization at any time by providing written notice to R & J's Privacy Officer that you wish to revoke your authorization. Upon receipt of the written revocation, we will stop using or disclosing your PHI, except to the extent that action has already been taken in reliance on the prior authorization.

#### **YOUR RIGHTS IN RELATION TO YOUR PROTECTED HEALTH INFORMATION**

##### **Right to Request Restrictions on Certain Uses and Disclosures**

You have the right to request that R & J limit its uses and disclosures of your PHI or to restrict the use or disclosure of your PHI to family members or personal representatives. Any request must be made in writing to the Privacy Officer listed in this Notice and must state the specific restriction requested and to whom that restriction would apply. We cannot agree to restrictions on uses or disclosures that are legally required, or which are necessary to administer R & J's business.

##### **Right to Receive Confidential Communications**

You have the right to request that communications involving PHI be provided to you at an alternative location or by an alternative means of communication. R & J is required to accommodate any reasonable request if the normal method of disclosure would endanger you and that danger is stated in your request. Any such request must be made in writing to the Privacy Officer listed in this Notice.

##### **Right to Access to Your Protected Health Information**

In most cases, you have the right to inspect and copy your PHI that is maintained in a designated record set. Federal law does prohibit you from having access to the following: psychotherapy notes; information compiled in reasonable anticipation of, or for use in a civil, criminal, or administrative action or proceeding; and PHI that is subject to a law that prohibits access to that information. If your request for access is denied, you may have a right to have that decision reviewed. To inspect or copy your PHI, you must send a written request to the Privacy Officer listed in this Notice. R & J may charge you a fee for the cost of copying, mailing, and supplies that are necessary to fulfill your request.

#### **Right to Amend Your Protected Health Information**

If you feel that your PHI is incomplete or incorrect, you have the right to request that we amend it as long as R & J maintains the PHI. R & J may deny your request for amendment if it determines that the PHI was not created by R & J, is not part of a designated record set, is not information that is available for inspection, or that the PHI is accurate and complete. If your request for amendment is declined, you have the right to have a statement of disagreement included with the PHI and R & J has a right to include a rebuttal to your statement, a copy of which will be provided to you. Requests for amendment of your PHI should be directed to the Privacy Officer listed in this Notice.

#### **Right to Receive an Accounting of Disclosures**

You have the right to receive an accounting of all the disclosures of your PHI that R & J has made, if any, for reasons other than disclosures for treatment, payment, and health care operations, as described above, and disclosures made to or authorized by you or your personal representative. Your right to an accounting of disclosures applies only to PHI created or maintained by R & J after April 14, 2003 and cannot exceed a period of six years prior to the date of your request. Requests for an accounting of disclosures of your PHI should be directed to the Privacy Officer listed in this Notice and must specify the time period for the PHI requested.

#### **Right to Receive a Paper Copy of this Notice of Privacy Practices**

You have the right to receive a paper copy of this Notice upon request. This right applies even if you have previously agreed to accept this Notice electronically. Requests for a paper copy of this Notice should be directed to the Privacy Officer listed in this Notice. A copy of this Notice will also be posted on the R & J's website.

#### **FOR MORE INFORMATION OR TO REPORT A PROBLEM**

If you have questions or would like additional information about R & J's Privacy Practices, you may contact R & J's Privacy Officer listed below. If you believe your privacy rights have been violated, you may file a complaint with the Privacy Officer or the Secretary of Health and Human Services, 200 Independence Avenue, S.W., Washington, D.C. 20201. Complaints should be filed in writing with the Privacy Officer listed in this Notice. Complaint forms will be available upon request. There will be no retaliation for filing a complaint.

#### **PRIVACY OFFICER**

For concerns related to your right to access, amend, or receive an accounting of disclosures or a paper copy of the Notice you may contact the Privacy Officer for a Health Plan at:

**Privacy Officer**

Jonathan Hiatt  
6190 Mae Anne Blvd., Ste. 2  
Reno, Nevada 89523  
(775) 786-7889

**EFFECTIVE DATE OF NOTICE: August 31, 2015**