The United States Letter Carriers Mutual Benefit Association is a life and health insurance organization designed exclusively for letter carriers and their families. MBA is a covered entity within the meaning of the Health Insurance Portability and Accountability Act of 1996, commonly known as HIPAA. Under HIPAA, MBA is legally required to provide all participants with notice of our legal duties and privacy practices with respect to protected health information (PHI). PHI includes any individually identifiable information that relates to a member’s physical or mental health, health care received or payment for health care—including name, address, date of birth and Social Security number.

The notice of privacy practices describes how medical information about a member may be used and disclosed and how the member can get access to this information.

The MBA is considered a “hybrid entity” under HIPAA, because not all of the benefits offered by MBA are covered by the privacy protections of HIPAA. The only plan offered by the MBA that is subject to HIPAA is the Hospital Plus plan.

MBA is legally required to maintain the privacy of a member’s PHI. The primary purpose of our privacy practices notice is to describe the legally permitted uses and disclosures of PHI, some of which may not apply to MBA in practice. The notice also describes a member’s right to access and control PHI.

Permitted uses and disclosures

We use and may disclose a member’s PHI in connection with receiving treatment, our payment for such treatment and for health care operations. Generally, we will make every effort to disclose only the minimum necessary amount of PHI to achieve the purpose of the use or disclosure:

- **Treatment**—This means the provision, coordination or management of health care. While we do not provide treatment, we may use or disclose PHI to support the provision, coordination or management of care. For example, we may disclose PHI to an individual responsible for coordinating the member’s health care, such as a spouse or adult child.

- **Payment**—This means activities in connection with processing claims for health care. We may need to use or disclose PHI to determine eligibility for coverage, medical necessity and for utilization review activities. For example, we could disclose PHI to physicians engaged by the MBA for their medical expertise to help us determine eligibility for coverage.

We may disclose PHI to third parties who are known as “business associates” who perform various activities for us; in such circumstances, we will have a written contract with the business associate, which requires the business associate to protect the privacy of PHI.

We may also disclose PHI and dependents’ PHI on explanations of benefit (EOB) forms and other payment-related correspondence, which are sent to the member.

We may disclose PHI to trustees in connection with appeals that are filed following a denial of a benefit claim or a partial payment. In addition, any trustee may receive PHI if a member requests that that trustee assists in filing or perfecting a claim for benefits under the MBA’s Health Plus plan. Trustees may also receive PHI if necessary for them to fulfill their fiduciary duties with respect to MBA. Such disclosures will be the minimum necessary to achieve the purpose of the use or disclosure. Such trustees must agree not to use or disclose PHI other than as permitted in this notice or as required by law, not to use or disclose the PHI with respect to any employment-related actions or decisions, or with respect to any other benefit plan maintained by the trustees.

We may disclose PHI to anyone who a member may authorize. Contact the MBA to obtain a copy of the appropriate form to authorize the people who may receive this information.

We may use or disclose a member’s PHI to the extent that we are required to do so by federal, state or local law. The member will be notified, if required by law, of any such uses or disclosures.

In addition to not disclosing PHI, MBA is bound not to disclose any personal private information about a member without written consent from that member.

To see the entire notice of privacy practices, please visit nalc.org/mba and click on “Privacy Policies” near the bottom of the page.

To you and your family, have an enjoyable Thanksgiving!