

**UNIVERSITY OF MAINE SYSTEM
HIPAA POLICY #45
GROUP HEALTH PLANS**

I. Requirements for Group Health Plans

Except as otherwise provided in this policy or as permitted pursuant to a written authorization signed by the individual, a group health plan, in order to disclose PHI to the plan sponsor or to provide for or permit the disclosure of PHI to the plan sponsor by a health insurance issuer or HMO with respect to the group health plan, must ensure that the plan documents restrict uses and disclosures of such information by the plan sponsor consistent with the requirements of section II.

The group health plan, or a health insurance issuer or HMO with respect to the group health plan, may disclose summary health information to the plan sponsor, if the plan sponsor requests the summary health information for the purpose of :

- A. Obtaining premium bids from health plans for providing health insurance coverage under the group health plan; or
- B. Modifying, amending, or terminating the group health plan.

The group health plan, or a health insurance issuer or HMO with respect to the group health plan, may disclose to the plan sponsor information on whether the individual is participating in the group health plan, or is enrolled in or has disenrolled from a health insurance issuer or HMO offered by the plan.

II. Requirements for Plan Documents

The plan documents of the group health plan must be amended to incorporate provisions to:

- A. Establish the permitted and required uses and disclosures of such information by the plan sponsor, provided that such permitted and required uses and disclosures may not be inconsistent with the Privacy Rule.
- B. Provide that the group health plan will disclose PHI to the plan sponsor only upon receipt of a certification by the plan sponsor that the plan documents have been amended to incorporate the following provisions and that the plan sponsor agrees to:
 - 1. Not use or further disclose the information other than as permitted or required by the plan documents or as required by law;
 - 2. Ensure that any agents, including a subcontractor, to whom it provides PHI received from the group health plan agree to the same restrictions and conditions that apply to the plan sponsor with respect to such information;
 - 3. Not use or disclose the information for employment-related actions and decisions or in connection with any other benefit or employee benefit plan of the plan sponsor;
 - 4. Report to the group health plan any use or disclosure of the information that is inconsistent with the uses or disclosures provided for of which it becomes aware;
 - 5. Make available PHI for access by an individual;
 - 6. Make available PHI for amendment and incorporate any amendments to PHI;
 - 7. Make available the information required to provide an accounting of disclosures;
 - 8. Make its internal practices, books, and records relating to the use and disclosure of PHI received from the group health plan available to the Secretary for purposes of determining compliance by the group health plan with HIPAA;
 - 9. If feasible, return or destroy all PHI received from the group health plan that the sponsor still maintains in any form and retain no copies of such information when no longer needed for the purpose for which disclosure was made, except that, if such return or destruction is not feasible, limit further uses and disclosures to those purposes that make the return or destruction of the information infeasible; and

10. Ensure that the adequate separation required in paragraph II(C) is established.
- C. Provide for adequate separation between the group health plan and the plan sponsor. The plan documents must:
1. Describe those employees or classes of employees or other persons under the control of the plan sponsor to be given access to the PHI to be disclosed, provided that any employee or person who receives PHI relating to payment under, health care operations of, or other matters pertaining to, the group health plan in the ordinary course of business must be included in such description;
 2. Restrict the access to and use by such employees and other persons to the plan administration functions that the plan sponsor performs for the group health plan; and
 3. Provide an effective mechanism for resolving any issues of noncompliance by such employees and other persons with the plan document provisions required by this policy.

III. Uses and Disclosures

A group health plan may:

- A. Disclose PHI to a plan sponsor to carry out plan administration functions that the plan sponsor performs only consistent with the provisions of section II;
- B. Not permit a health insurance issuer or HMO with respect to the group health plan to disclose PHI to the plan sponsor except as permitted by this policy;
- C. Not disclose and may not permit a health insurance issuer or HMO to disclose PHI to a plan sponsor as otherwise permitted by this policy unless a statement to that effect is included in the Notice of Privacy Practices; and
- D. Not disclose PHI to the plan sponsor for the purpose of employment-related actions or decisions or in connection with any other benefit or employee benefit plan of the plan sponsor.
- E. Not use or disclose PHI that is genetic information for underwriting purposes.

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