Florida complete care

Notice of Privacy Practices

THIS NOTICE EXPLAINS HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Protecting Your Privacy

NOTICE OF PRIVACY PRACTICES
Privacy Notice
Effective: October 1, 2023 Updated: February 13, 2026

For help to translate or understand this, please call (1-833-322-7526). If you are hearing impaired, call TDD/TTY 1-800-955-8770.

Si necesita ayuda para traducir o entender este texto, por favor llame al telefono. (1-833-322-7526/TTY 711). Interpreter services are provided free of charge to you.

At Florida Complete Care, your privacy is important to us. We will do all we can to protect your health records. We protect your records by allowing only certain staff access to your information. We use passwords and firewalls to protect information on computers and locked file cabinets to protect paper documents. By law, we must protect your health records and send you this notice.

This notice tells you how we use your health records. It describes when we can share your records with others. It explains your rights about the use of your health records. It also tells you how to exercise those rights and who can see your health records. This notice does not apply to information that does not identify you.

When we talk about your health records in this notice, it includes any information about all of your health services while you are a member of Florida Complete Care. This includes providing healthcare to you and also includes payment for your healthcare while you are our member.

Please note: *You will also receive a Privacy Notice from the Center for Medicare and Medicaid Services outlining their rules for your health records. Other health plans and healthcare providers may have other rules when using or sharing your health records. We ask that you obtain a copy of their Privacy Notices and read them carefully.*

How We Use or Share Your Health Records

Here are ways we may use or share your health records:

- To help pay your medical bills given to us by healthcare providers.
- To help your healthcare providers give you the proper care. For example, if you are in the hospital, we may give them your records sent to us by your doctor.
- To help manage your healthcare. For example, we might talk to your doctor about a disease or wellness program that could help improve your health.

- To help resolve any appeals or grievances filed by you or a healthcare provider with Florida Complete Care or the Center for Medicare and Medicaid Services.
- To assist others who help us provide your health services. We will not share your records with these outside groups unless they agree to protect your records.
- For public health or disaster relief efforts.
- To remind you if you have a doctor's visit coming up.
- To give you information about other healthcare treatments and programs, such as how to stop smoking or lose weight.

State and federal laws may call for us to give your health records to others for the following reasons:

- To state and federal agencies that oversee Florida Complete Care, such as CMS, AHCA or the U.S. Department of Health and Human Services.
- For public health actions. For example, the FDA may need to check or track medicines and medical device problems.
- To public health groups if we believe there is a serious public health or safety threat.
- To a health agency for certain activities. This might include audits, inspections, and licensure or enforcement actions.
- To a court or administrative agency.
- To law enforcement. For example, records may be used to identify or find someone who is a suspect, fugitive, material witness or missing person.
- To a government person about child abuse, neglect, or violence in your home.
- To a coroner or medical examiner to identify a dead person or help find a cause of death. These may be needed by a funeral director to help them carry out their duties.
- For organ transplant purposes.
- For special government roles, such as military and veteran activities, national security and intelligence activities, and to help protect the President and others.
- For job-related injuries due to your state's worker compensation laws.
- If one of the above reasons does not apply, we must obtain your written approval to use or share your health records with others. If you change your mind, you may retract your written approval at any time.
- If sharing your health information is not allowed by or limited by a state law, we will obey the law that protects your health information best.

What Are Your Rights?

The following are your rights with regards to your health records. If you would like to exercise any of the following rights, please contact us. We can be reached at (1-833-322-7526).

- You have the right to ask us to give your records only to certain people or groups and to say for what reasons. You also have the right to ask us to stop your records from being given to family members or others who are involved in your healthcare. Please note that while we will try to follow your wishes, the law does not make us do so.
- You have the right to ask to get confidential communications of your health records. For example, if you believe that you would be harmed if we send your records to your current mailing address, you can ask us to send your health records by other means. Other means might be fax or an alternate address.

- You have the right to view and get a copy of all the records we keep about you in your designated record set. This consists of anything we use to make decisions about your health. It includes enrollment, payment, claims processing and medical management records.

You do not have the right to get certain types of health records. We may decide not to give you the following:

- Information contained in psychotherapy notes.
- Information collected in reasonable anticipation of, or for use in a court case or another legal proceeding.
- Information subject to certain federal laws about biological products and clinical laboratories.
- In certain situations, we may not let you get a copy of your health records. You will be informed in writing. You may have the right to have our action reviewed.

You have the right to ask us to make changes to wrong or incomplete health records we keep about you. These changes are known as amendments. Any request for an amendment must be in writing. You need to give a reason for your change(s). We will get back to you in writing no later than 60 days after we get your request. If we need additional time, we may take up to another 30 days. We will let you know of any delays and the date when we will get back to you.

If we make your changes, we will let you know they were made. We will also give your changes to others who we know have your health records and to other persons you name. If we choose not to make your changes, we will let you know why in writing. You will have a right to submit a letter disagreeing with us. We have a right to answer your letter. You then have the right to ask that your original request for changes, our denial and your second letter disagreeing with us be put with your health records for future disclosures. You have the right to receive an accounting of disclosures of your health records to others for six years beginning January 1, 2011. By law, we do not have to give you a list of the following:

- Health records given or used for treatment, payment and healthcare operations purposes.
- Health records given to you or others with your written approval.
- Information that is incidental to a use or disclosure otherwise permitted.
- Health records given to persons involved in your care or for other notification purposes.
- Health records used for national security or intelligence purposes.
- Health records given to prisons, police, FBI, and others who enforce laws or health oversight agencies.
- Health records given or used as part of a limited data set for research, public health, or healthcare operations purposes.

To receive an accounting of disclosures, your request must be in writing. We will act on your request within 60 days. If we need more time, we may take up to another 30 days. We will inform you of any delays and the date we will get back to you. Your first list will be free. We will give you one free list every 12 months. If you ask for another list within 12 months, we may charge you a fee. We will tell you the fee beforehand and give you a chance to take back your request.

Using Your Rights

- ***You have a right to receive a copy of this notice at any time. We reserve the right to change the terms of this notice.*** Any changes in our privacy practices will apply to all the health records that we keep. If we make changes, we will send a new notice to you.
- ***If you have any questions about this notice or how we use or share your health records, please call.*** We can be reached at (1-833-322-7526). Our office is open 8 a.m. to 8 p.m. Monday through Friday.

How We Protect Your Substance Use Disorder (SUD) Records
We may maintain certain records that relate to your diagnosis, treatment, or referral for treatment of a Substance Use Disorder (SUD). These records are protected by federal law under 42 C.F.R. Part 2, which provides stricter privacy protections than the standard HIPAA Privacy Rule.

What are your Rights Regarding SUD Records?
You have the right:
- To clear notice of how we may use and disclose your SUD records
- Your individual rights under Part 2, and
- Our legal duties related to maintaining the confidentiality of these records.

Restrictions on Disclosure for Legal Proceedings
Your SUD treatment records cannot be used or disclosed in civil, criminal, administrative, or legislative proceedings against you unless you provide written consent, or there is a court order.

Potential Redisclosure Notice
If we disclose your information to another party consistent with the law, that information may be redisclosed by the recipient and may no longer be protected under HIPAA. However, SUD records remain protected by Part 2.

If you believe your privacy rights have been violated, you may write a letter of complaint to:

Privacy Official – Florida Complete Care
HPMP of Florida, Inc. d/b/a Florida Complete Care
4601 N.W. 77 Avenue
Miami, FL 33166

You may also contact the Secretary of the U.S. Department of Health and Human Services:

Office for Civil Rights – Region IV
U.S. Department of Health & Human Services
61 Forsyth Street, S.W.
Atlanta, GA 30303-8909
Voice Phone (800) 368-1019; TDD (800) 537-7697 Fax (404) 562-7881

We reserve the right to change the terms of this notice. The changes will apply to all information we maintain. If we make any material changes, we will post the revised notice on our website and we will mail a copy to you upon your request.