

LOCAL GOVERNMENT HEALTH INSURANCE BOARD WELLNESS PROGRAM PRIVACY NOTICE

The Local Government Health Insurance Board (LGHIB) Wellness Program is a voluntary wellness program available to all active employees, non-Medicare retirees, and spouses, who are covered under the Local Government Health Insurance Plan (LGHIP), Group 30000. The program is administered according to federal rules permitting employer-sponsored wellness programs that seek to improve employee health or prevent disease, including the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008, and the Health Insurance Portability and Accountability Act, as applicable, among others.

All active employees, non-Medicare retirees, and spouses, who are covered in group 30000, are eligible to participate in one worksite wellness screening during the wellness qualifying period.* You can also have your wellness screening performed by your primary care physician; however, all applicable copayments will apply. Participating pharmacies will provide screenings at no charge. For a list of those pharmacies, go to www.lghip.org.

If you choose to participate in the wellness program, you will be asked to complete a biometric screening, which will include checking your blood pressure and measuring your height and weight. Also, a blood sample will be taken to check your cholesterol, triglycerides, and glucose. You will also be asked whether you have or have had high cholesterol, high blood pressure, or diabetes and whether you take medicine for those conditions. The screening is intended to let you know whether you are at risk for certain medical conditions resulting from high blood pressure, obesity, high cholesterol, or diabetes. You are not required to participate in the wellness program and/or participate in the blood test or any other components of the biometric screening.

The results from your biometric screening will be used to provide you with information to help you understand your current health and potential risks and may also be used by the LGHIB and our business associates to offer you services, such as wellness coaching and/or disease management coaching. You also are encouraged to share your results or concerns with your own doctor.

The LGHIB provides incentives to your employer if your employer meets certain wellness program participation percentages. Your employer may then choose to offer individual incentives for you to participate in the wellness program. However, your employer cannot deny access to health insurance or any package of health insurance benefits or retaliate against you due to your refusal to participate in the wellness program.

If you are unable to participate in any of the health-related activities, you may be entitled to a reasonable accommodation or an alternative standard. You may request a reasonable accommodation or an alternative standard by contacting the LGHIB Wellness Division at 1-866-838-9137, option 4.

*Wellness qualifying period information is located within the Wellness Program section of www.lghip.org.

Protections from Disclosure of Medical Information

The LGHIB and its business associates are required by law to maintain the privacy and security of your personally identifiable health information. Although the wellness program and the LGHIB may use aggregate information the LGHIB collects to design a program based on identified health risks in the workplace, the LGHIB Wellness Program will not disclose your screening results either publicly or to your employer, except as necessary to respond to a request from you for a reasonable accommodation needed to participate in the wellness program or as expressly permitted by law. Medical information that personally identifies you, that is provided in connection with the wellness program, will not be provided to your supervisors or managers and may never be used to make decisions regarding your employment.

Your health information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the wellness program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the wellness program. Anyone who receives your information for purposes of providing you services as part of the wellness program will abide by the same confidentiality requirements. The only individuals who will receive your personally identifiable health information are nurses, doctors, health coaches and staff from the LGHIB and our business associates in order to provide you with services under the wellness program.

In addition, all medical information obtained through the wellness program will be maintained by the LGHIB, separate from your employer's personnel records, and no information you provide as part of the wellness program may be used by your employer in making any employment decision. Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occurs involving information you provide in connection with the wellness program, we will notify you immediately.

You cannot be discriminated against in employment because of the medical information you provide as part of participating in the wellness program, nor will you be subjected to retaliation if you choose not to participate.

If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, please contact the LGHIB Wellness Division at 1-866-836-9137, option 4.

Please return completed forms to:

LGHIB WELLNESS
PO BOX 304901
MONTGOMERY, AL 36130
wellness@lghip.org

Phone: 1-866-836-9137, option 4
Fax: (334) 851-6808