The Fishing Partnership Notice of Privacy Practices

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

Effective Date of this Privacy Notice: October 1, 2013

We are required by law to protect the privacy of information used to apply for health insurance through a Health Insurance Exchange, that may reveal your identity. Information here means your Personally Identifiable Information. We are also required by law to provide you with a copy of this Privacy Notice which describes our legal duties and information privacy practices, as well as the rights you have with respect to your Information.

How We May Change our Notice of Privacy Practices

We may change our privacy practices from time to time. If we make any material revisions to this Privacy Notice, we will provide you with a copy of the revised Privacy Notice which will specify the date on which such revised Privacy Notice becomes effective. The revised Privacy Notice will apply to all of your Information from and after the date of the Privacy Notice.

How We May Use and Disclose Your Information Without Written Authorization

The Fishing Partnership requires its employees to follow its privacy and security policies and procedures to protect your Information in oral (for example, when discussing your Information with authorized individuals over the telephone or in person), written or electronic form. The following are situations where we do not need your written authorization to use your Information or to share it with others.

1. **Authorized Functions Under the Health Insurance Exchange.** We may use your Information to complete the following services in our roles as Navigators or Certified Applicant Counselors:

   - **Information and Education.** We may use your Information to provide information to you about the full range of health plan options available on the health insurance exchange.

   - **Assistance with Applications.** We may use your Information to assist you with applications for coverage through a plan listed on the health insurance exchange.

   - **Enrollment in Health Plans.** We may use your Information to facilitate your enrollment of in plans and insurance affordability programs offered through the health insurance exchange.
You may restrict our use of your information to the authorized functions discussed in this section by contacting our Privacy Officer at the address listed on the last page of this Notice.

2. **Related Services.** We may use your Information or share it with others to help provide you with services such as occupational safety training, financial counseling and health benefits, such as screenings, reminders for immunizations and opportunities for dental work.

3. **Individual’s Authorized Parties:** You may identify one or more individuals with whom FPSS is authorized to share Information or may contact in regards to the member or non-member who gave the initial consent. Identification of Authorized Representatives must be done in writing and signed by the individual concerned. Authorized parties will be asked to sign a privacy policy agreement which will be kept on records. Authorized parties may be a family member, translator, friend of the member or non-member who is involved in a member or non-member case in order to facilitate between a member or non-member and FPSS, among others.

4. **Public Need.** We may use your Information, and share it with others, in order to comply with the law or to meet important public needs that are described below:

   - if we are required by law to do so;
   - to government agencies authorized to conduct audits, investigations, and inspections, as well as civil, administrative or criminal investigations, proceedings, or actions, including those agencies that monitor programs such as Medicare and Medicaid;
   - to a public health authority if we reasonably believe you are a possible victim of abuse, neglect or domestic violence;
   - if ordered by a court or administrative tribunal to do so, or pursuant to a subpoena, discovery or other lawful request by someone else involved in the dispute, but only if efforts have been made to tell you about the request or to obtain a court order protecting the information from further disclosure;
   - to law enforcement officials to comply with court orders or laws, and to assist law enforcement officers with identifying or locating a suspect, fugitive, witness, or missing person;
   - to prevent a serious and imminent threat to your health or safety, or the health or safety of another person or the public, which we will only share with someone able to help prevent the threat;
   - for research purposes;
   - to the extent necessary to comply with workers’ compensation or other programs established by law that provide benefits for work-related injuries or illness without regard to fraud;
   - to appropriate military command authorities for activities they deem necessary to carry out their military mission;
   - to authorized federal officials who are conducting national security and intelligence activities or providing protective services to the President or other important officials;

5. **Completely De-Identified and Partially De-Identified Information.** We may use and disclose your Information if we have removed any information that has the potential to identify you so that the Information is “completely de-identified.” We may also use and disclose this de-identified Information about you for public health and research purposes, or for business operations. De-identified Information will not contain any information that would directly identify you (such as your name, street address, Social Security number, phone number, fax number, electronic mail address, Web site address, or license number).
Requirement for Written Authorization

We may use your Information for the purposes described in this Privacy Notice. You may also give us written authorization to use your Information or to disclose it to anyone for any purpose. We cannot use or disclose your Information for any reason except those described in this Privacy Notice unless you give us a written authorization to do so. For example, we require your written authorization for disclosures of Information for marketing purposes and disclosures that constitute a sale of your Information. Marketing is a communication about a product or service that encourages recipients of the communication to purchase or use the product or service.

You may revoke your authorization in writing at any time. You can write to us at the addresses listed on the last page of this Privacy Notice. Your revocation will not affect any use or disclosures permitted by your authorization while it was in effect.

Your Rights to Access and Control Your Information

We want you to know that you have the following rights to access and control your Information.

6. **Right to Access Your Information.** You have the right to inspect and obtain a copy of your Information except for Information: (i) compiled in anticipation of, or for use in, a civil, criminal, or administrative proceeding; or (ii) created under a law that prohibits your access to the information.

   If you would like to access your Information, please send your written request to the address listed on the last page of this Privacy Notice. We will ordinarily respond to your request within 30 days. If we need additional time to respond, we will let you know as soon as possible. We may charge you a reasonable, cost-based fee to cover copy costs and postage.

7. **Right to Amend Your Information.** If you believe we have Information about you that is incorrect or incomplete, you may request in writing an amendment to your Information. If we do not have your Information, we will give you the contact information of someone who does. You will receive a response within 10 days after we receive your request. If we did not create your Information or your Information is already accurate and complete, we can deny your request and notify you of our decision in writing. You can also submit a statement that you disagree with our decision, which we can rebut.

8. **Right to Receive an Accounting of Disclosures.** You have the right to receive an accounting of disclosures of your Information made by us. You may request such information for the ten-year period prior to the date of your request. Accounting of disclosures will not include disclosures:

   (i) made to carry out the authorized functions;
   (ii) made to you or your personal representative;
   (iii) you authorized in writing;
   (v) for research, public health or our business operations;
(vi) made to federal officials for national security and intelligence activities;

(vii) made to correctional institutions or law enforcement; and

(viii) incident to a use or disclosure otherwise permitted or required by law.

If you would like to receive an accounting of disclosures, please write to the address listed on the last page of this Privacy Notice. If we do not have your Information, we will give you the contact information of someone who does. You will receive a response within 30 days after your request is received. You will receive one request annually free of charge, but we may charge you a reasonable, cost-based fee for additional requests within the same twelve-month period.

9. **Breach of Information.** We are required by law to maintain the privacy of your Information, and to provide you with this Privacy Notice containing our legal duties and privacy practices with respect to your Information. Our policy is to encrypt our electronic files containing your Information so as to protect the information from those who should not have access to it.

10. **Right To Obtain A Paper Copy Of This Notice.** You have the right at any time to obtain a paper copy of this Privacy Notice, even if you receive this Privacy Notice electronically. Please send your written request to the address listed on the last page of this Privacy Notice or visit our Web site at http://fishingpartnership.org.

11. **How to Learn About Special Protections for HIV, Alcohol, and Substance Abuse, Mental Health, and Genetic Information.** Special privacy protections apply to HIV-related information, alcohol and substance abuse treatment information, mental health information, and genetic information. Some parts of this general Notice may not apply to these types of information.

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**Miscellaneous**

1. **Contact Information.** If you have any questions about this Privacy Notice, you may contact the Privacy Officer at (617) 928-3443, visit [http://fishingpartnership.org/](http://fishingpartnership.org/), or write to us at:

   The Fishing Partnership Support Services
   30 Chestnut Avenue, Suite #2
   Burlington, MA 01803

2. **Complaints.** If you are concerned that we may have violated your privacy rights, you may complain to us using the contact information above. You also may submit a written complaint to the U.S. Department of Health and Human Services. If you choose to file a complaint, we will not retaliate or take action against you for your complaint.

3. **Additional Rights.** This Privacy Notice explains the rights you have with respect to your Information, including access and amendment rights, under federal law. To the extent state law affords you greater rights than described in this Privacy Notice, we will comply with these laws.