

Notice of Privacy Practices.

Your Information. Your Rights.

Our Responsibilities.

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

Oscar Insurance Entities

Address

75 Varick St., 5th Floor New York New York,
10013

Website

www.hioscar.com

Privacy Officer's Contact Information

Address

Privacy Officer, Privacy Department 75 Varick St., 5th Floor New
York New York, 10013

Phone: 1-844-392-7589

Email: privacy@hioscar.com

Your Rights.

You have the right to:

- Get a copy of your health and claims records.
- Correct your health and claims records.
- Request confidential communication.
 - You may request an alternative means or location for receiving communications. You may submit a confidential communication request at any time. To make a request, please call 1-855-672-2755 or email privacyrequest@hioscar.com. You may also send a formal written request to P.O. Box 52146, Phoenix, AZ 85072–2146. All members please note, we will need to further verify your identity to complete this request.
 - For more information, please visit our Privacy Policy at <https://www.hioscar.com/legal/privacy/>
- Ask us to limit the information we share.
- Get a list of those with whom we've shared your information.
- Get a copy of this privacy notice.
- Choose someone to act for you.
- File a complaint if you believe your privacy rights have been violated.

Your Choices.

You have some choices in the way that we use and share information as we:

- Answer coverage questions from your family and friends.
- Provide disaster relief.
- Market our services and sell your information.

Our Uses and Disclosures.

We may use and share your information as we:

- Help manage the health care treatment you receive.
- Run our organization.
- Pay for your health services.
- Administer your health plan.
- Help with public health and safety issues.
- Do research.
- Comply with the law.
- Respond to organ and tissue donation requests and work with a medical examiner or funeral director.
- Address workers' compensation, law enforcement, and other government requests.
- Respond to lawsuits and legal actions.

- Develop and use tools and technologies, including technologies with artificial intelligence capabilities, to improve our services.

Get a copy of health and claims records

- You can ask to see or get a copy of your health and claims records and other health information we have about you. Ask us how to do this.
- We will provide a copy or a summary of your health and claims records, usually within 30 days of your request. We may charge a reasonable, cost-based fee.

Ask us to correct health and claims records

- You can ask us to correct your health and claims records if you think they are incorrect or incomplete. Ask us how to do this.
- We may say “no” to your request, but we’ll tell you why in writing within 60 days.

Request confidential communications

- You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address.
- We will consider all reasonable requests, and must say “yes” if you tell us you would be in danger if we do not.

Ask us to limit what we use or share

- You can ask us not to use or share certain health information for treatment, payment, or our operations.
- We are not required to agree to your request, and we may say “no” if it would affect your care.

Get a list of those with whom we’ve shared information

- You can ask for a list (accounting) of the times we’ve shared your health information for six years prior to the date you ask, who we shared it with, and why.
- We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We’ll provide one accounting a year for free but will charge a reasonable, cost-based fee if you ask for another one within 12 months.

Get a copy of this privacy notice

- You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.

Choose someone to act for you

- If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information.
- We will make sure the person has this authority and can act for you before we take any action.

File a complaint if you feel your rights are violated

- You can complain if you feel we have violated your rights by contacting us using the information on page 1.
- You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201
- Call 1-877-696-6775, or visit www.hhs.gov/ocr/privacy/hipaa/complaints/.
- We will not retaliate against you for filing a complaint.

Your Choices.

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

In these cases, you have both the right and choice to tell us to:

- Share information with your family, close friends, or others involved in payment for your care.
- Share information in a disaster relief situation.

If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.

In these cases, we never share your information unless you give us written permission:

- Marketing purposes
- Sale of your information

California Residents

This portion of the Privacy Notice applies to individuals who are California residents, and is adopted to conform with the California Consumer Protection Act of 2018 (CCPA). Any terms defined in the CCPA have the same meaning when used herein.

The CCPA does not apply to “protected health information” under HIPAA; “medical information” under the California Confidentiality of Medical Information Act (CMIA); nonpublic “personal information” under the Fair Credit Reporting Act (FCRA), the Gramm-Leach-Bliley Act (GLBA) or California Financial Information Privacy Act (CalFIPA); de-identified or aggregated information; or publicly available information. This portion of the Privacy Notice applies only to information included in the CCPA’s scope.

Information We Collect This section describes the categories of information we have collected from consumers in the past 12 months, and examples of such information.

Category of Information	Examples	Business Purpose for Collection
Identifiers	Real name, alias, postal address, unique personal identifier, online identifier, internet protocol address, email address, account name, social security number, driver’s license number, passport number, user behavior information, communications, or other similar identifiers.	To fulfill or meet the reason you provided the information; Account maintenance purposes; To improve or enhance our Services and Site, including through advanced technologies, such as artificial intelligence.
Personal Information per categories listed in the California Customer Records statute (Cal. Civ. Code § 1798.80(e))	Name, signature, social security number, physical characteristics or description, address, telephone number, passport number, driver’s license or state identification card number, insurance policy number, education, employment, employment history, bank account number, credit card number, debit card number, or any other financial information, medical information, or health insurance information.	To fulfill or meet the reason you provided the information; Account maintenance purposes; To improve or enhance our Services and Site.
Protected classification characteristics under California or federal law	Race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, age, sexual orientation, or military and veteran status.	To improve or enhance our Services and Site, including through advanced technologies, such as artificial intelligence.
Internet or other similar network activity	Browsing history, search history, and information regarding a consumer’s interaction with an internet website, application, or advertisement.	To fulfill or meet the reason you provided the information; To improve or enhance our Services and Site.
Professional or employment-related information	Current or past job history or performance evaluations.	To fulfill or meet the reason you provided the information.

Disclosure of Information: In the past 12 months, we have disclosed the following categories of information to third parties for business purposes: Identifiers; Personal Information per categories listed in the California Customer Records statute (Cal. Civ. Code § 1798.80(e)); Protected classification characteristics under California or federal law; Internet or other similar network activity; and Professional or employment-related information.

Sale of Information: In the past 12 months, we have not sold any information to third parties.

Rights Under the CCPA Right to Access Information: After receiving a verifiable consumer request, we will provide the requestor the personal information we have about the individual. If the request is not verifiable, we will provide categories of the information we have about the individual.

Right to Delete Information: After receiving a verifiable request, we will delete personal information we have about the individual, unless a CCPA exception applies.

Right to Opt Out of the Sale of Information: You have a right to opt out of the sale of information to third parties. We do not sell personal information to third parties.

Non-Discrimination: We will not discriminate against you for exercising your rights under the CCPA.

To exercise your rights under the CCPA, please call 1-855-672-2755 or visit [CCPA request](#). We will use the information you provide in your request to verify your identity. You must provide certain information when requesting to access or to delete personal information, including: your name, date of birth, email, phone number, and address.

You may designate an authorized agent to make your request to exercise your rights. For more information on authorized agents under the CCPA, please visit the California Attorney General's website at: <https://oag.ca.gov/>.

Fees may apply when permitted by law.

Other California Rights Under California Civil Code Sections 1798.83-1798.84, California residents are entitled to ask us for a notice identifying the categories of Personal Information which we share with our affiliates and/or third parties for marketing purposes, and providing contact information for such affiliates and/or third parties. If you are a California resident and would like a copy of this notice, please submit a written request to compliance@hioscar.com

Contact Us Please call 1-855-672-2755 or email compliance@hioscar.com with any questions or concerns.

Our Uses and Disclosures

How do we typically use or share your health information? We typically use or share your health information in the following ways.

Help manage the health care treatment you receive

- We can use your health information and share it with professionals who are treating you.
- **Example:** A doctor sends us information about your diagnosis and treatment plan so we can arrange additional services.
- We can also use your health information with technologies that process your information, including care coordination tools and technologies with artificial intelligence capabilities, to support the management of your care.
- **Example:** Your health information may be processed through artificial intelligence tools to create an initial draft of correspondence to you and your health care providers.

Run our organization

- We can use and disclose your information to run our organization and contact you when necessary. We are not allowed to use genetic information to decide whether we will give you coverage and the price of that coverage. This does not apply to long term care plans.
- We can use and disclose your race/ethnicity and language data to run our organization to develop better services for you. We are not allowed to use race/ethnicity and language data to decide underwriting and denial of coverage and benefits.
- We can analyze your information, including through the use of artificial intelligence tools, to determine how to improve our services.
- **Example:** We use health information about you to develop better services for you, for example to provide you with information on disease management or wellness programs that could help improve your health, or send you reminders about your benefits or care, such as automated appointment reminders.

Pay for your health services

- We can use and disclose your health information as we pay for your health services.
- **Example:** We share information about you with your dental plan to coordinate payment for your dental work.

Administer your plan

- We may disclose your health information to your health plan sponsor for plan administration.
- **Example:** Your company contracts with us to provide a health plan, and we provide your company with certain statistics to explain the premiums we charge.

How else can we use or share your health information?

We are allowed or required to share your information in other ways— usually in ways that contribute to the public good, such as public health and research— including through the creation of de-identified data, such as to study and improve population health. We have to meet many conditions in the law before we can share your information for these purposes. For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html. We also require our HIPAA Business Associates that perform functions on our behalf or provide us with services to protect the privacy of your health information, under contracts with us and as required by federal law.

Help with public health and safety issues

We can share health information about you for certain situations such as:

- Preventing disease
- Helping with product recalls
- Reporting adverse reactions to medications
- Reporting suspected abuse, neglect, or domestic violence
- Preventing or reducing a serious threat to anyone's health or safety

Do research

- We can use or share your information for health research.
- We and our authorized vendors may remove information that identifies you from your health information and share this de-identified information to study healthcare and health plan services, among other things. De-identified information may also be used with artificial intelligence tools, including to develop and train models and algorithms.

Comply with the law

- We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law.

Respond to organ and tissue donation requests and work with a medical examiner or funeral director

- We can share health information about you with organ procurement organizations.
- We can share health information with a coroner, medical examiner, or funeral director when an individual dies.

Address workers' compensation, law enforcement, and other government requests

We can use or share health information about you:

- For workers' compensation claims
- For law enforcement purposes or with a law enforcement official
- With health oversight agencies for activities authorized by law
- For special government functions such as military, national security, and presidential protective services

Respond to lawsuits and legal actions

- We can share health information about you in response to a court or administrative order, or in response to a subpoena, security, and presidential protective services

We collect and maintain oral, written, and electronic information to administer our business and to provide products, services, and information of importance to our members. We use security safeguards and techniques designed to protect your information. We train our employees about our privacy policies and practices, and we limit access to your information to only those employees who need it in order to perform their business responsibilities.

We do not disclose genetic information for underwriting purposes. We do not sell member information for HIPAA-defined fundraising purposes. If the use or disclosure of health information is prohibited or materially limited by other laws that apply to us, it is our intent to meet the requirements of the more stringent law. This means we may restrict others' access to your health information as required by state and federal law.

Our Responsibilities.

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

Changes to the Terms of this Notice

We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, on our website, and we will mail a copy to you.

Effective Date of Notice: October 1, 2013

Last updated: March 31, 2023

This Notice of Privacy Practices applies to the following Oscar Insurance Entities:

- Oscar Insurance Corporation
- Oscar Insurance Corporation of New Jersey
- Oscar Health Plan of California
- Oscar Insurance Company (dba “Oscar Managed Care” for Medicare Advantage Plans)
- Oscar Insurance Corporation of Ohio
- Oscar Garden State Insurance Corporation
- Oscar Health Plan, Inc.
- Oscar Insurance Company of Florida
- Oscar Buckeye State Insurance Corporation
- Oscar Health Plan of Pennsylvania, Inc.
- Oscar Health Plan of Georgia
- Oscar Health Plan of New York, Inc.
- Oscar Health Plan of North Carolina
- Oscar Managed Care of South Florida, Inc.

Questions? Contact the Privacy Officer:

Address

Privacy Officer, Privacy Department
75 Varick St., 5th Floor, New York, New York, 10013

Phone: 1-844-392-7589

Email: privacy@hioscar.com

Financial Information Privacy Notice

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

Effective October 1, 2013, Oscar is committed to maintaining the confidentiality of your personal financial information. For the purpose of this notice, “personal financial information” means information about an enrollee or an applicant for health care coverage that identifies the individual, is not generally publicly available, and is collected from the individual or is obtained in connection with providing health care coverage to the individual.

Information Oscar Collects

Oscar collects personal financial information about you from sources such as applications, claims forms, consumer reports, site use information, and other transactional documents. These documents may contain information such as your name, address, age, medical information, contact information, and/or social security number.

Disclosure of Information - Restrictions

- Oscar does not disclose genetic information for underwriting purposes. ● Oscar does not sell any member information without the express written authorization of the member; this specifically includes for marketing purposes.
- Oscar does not disclose personal financial information about our members or former members to any third party, except as required or permitted by law. For example, in the course of our general business practices, Oscar may, as permitted by law, disclose any of the personal financial information that we collect about you, without your authorization, to the following types of institutions:
- To Oscar's corporate affiliates, which include financial service providers, such as other insurers, and non-financial companies, such as data processors. ● To non-affiliated companies for our everyday business purposes, such as to process your transactions, maintain your account(s), or respond to court orders and legal investigations; and
- To non-affiliated companies that perform services for us, including sending promotional communications on our behalf.
- Please note that we do not destroy personal information when you terminate coverage with us. It may be necessary to use and disclose this information for the purposes described above even after your coverage terminates, although policies and procedures will remain that protect against inappropriate use or disclosure.

Questions About this Notice

If you have any questions about this notice, please contact Oscar at 1-844-392-7589 or write to Oscar.

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