HIPAA BUSINESS ASSOCIATE TERMS AND CONDITIONS

To Whom It May Concern:

In January 2013, the Health Insurance Portability and Accountability Act (HIPAA) was revised by what is known as the HIPAA Omnibus Rule. Among other things, the HIPAA Omnibus Rule establishes obligations in addition to those that were previously set forth under HIPAA and the American Recovery and Reinvestment Act of 2009 (ARRA). Further, the HIPAA Omnibus Rule includes changes to the obligations of Business Associates, requiring an amendment to the Business Associates Agreement (BAA) you have with UPMC Health Plan or its affiliate entities (the "Covered Entity").

As a result, effective 8/1/14 we are implementing a new BAA process for current and future Business Associates:

- If the Covered Entity negotiated a HIPAA Business Associate Agreement with you prior to September 23, 2013, by continuing to perform services after September 23, 2013, you agree that your Business Associate Agreement is amended to comply with the HIPAA Omnibus Rule Terms and Conditions for Business Associates. A copy of those Terms and Conditions is available at http://www.upmchealthplan.com/about/vendor_information.html.
- If you are a new Business Associate after September 23, 2013, your underlying agreement to provide services to the Covered Entity will require you to comply with the HIPAA Omnibus Rule Terms and Conditions for Business Associates. A copy of those Terms and Conditions is available at http://www.upmchealthplan.com/about/vendor_information.html.

Please note you are also responsible for periodically reviewing our web site for updates to the Business Associate Terms & Conditions.

Thank you in advance for your cooperation and assistance in this matter.

Sincerely,

UPMC Health Plan Corporate Compliance Office