

NOT DISCLOSE SPECIFIC MEDICAL INFORMATION CONTAINED IN A SUBSCRIBER'S OR CERTIFICATE HOLDER'S MEDICAL RECORDS.

(B) EXCEPTION — DISCLOSURE TO OR AUTHORIZED BY SUBSCRIBER OR CERTIFICATE HOLDER.

A NONPROFIT HEALTH SERVICE PLAN OR BLUE CROSS OR BLUE SHIELD PLAN MAY DISCLOSE SPECIFIC MEDICAL INFORMATION CONTAINED IN A SUBSCRIBER'S OR CERTIFICATE HOLDER'S MEDICAL RECORDS:

(1) TO THE INDIVIDUAL OR INDIVIDUAL'S AGENT OR REPRESENTATIVE; OR

(2) IF THE INDIVIDUAL AUTHORIZES THE DISCLOSURE.

(C) SAME — DISCLOSURE WITHOUT AUTHORIZATION OF SUBSCRIBER OR CERTIFICATE HOLDER.

A NONPROFIT HEALTH SERVICE PLAN OR BLUE CROSS OR BLUE SHIELD PLAN MAY DISCLOSE SPECIFIC MEDICAL INFORMATION CONTAINED IN A SUBSCRIBER'S OR CERTIFICATE HOLDER'S MEDICAL RECORDS WITHOUT THE AUTHORIZATION OF THE SUBSCRIBER OR CERTIFICATE HOLDER:

(1) TO A MEDICAL REVIEW COMMITTEE, ACCREDITATION BOARD, OR COMMISSION, IF THE INFORMATION IS REQUESTED BY OR IS IN FURTHERANCE OF THE PURPOSE OF THE COMMITTEE, BOARD, OR COMMISSION;

(2) IN RESPONSE TO LEGAL PROCESS;

(3) TO ANOTHER NONPROFIT HEALTH SERVICE PLAN, BLUE CROSS OR BLUE SHIELD PLAN, OR INSURER TO COORDINATE BENEFIT PAYMENTS UNDER MULTIPLE SICKNESS AND ACCIDENT, DENTAL, OR HOSPITAL MEDICAL CONTRACTS;

(4) TO A GOVERNMENT AGENCY PERFORMING ITS LAWFUL DUTIES AS AUTHORIZED BY AN ACT OF THE GENERAL ASSEMBLY OR UNITED STATES CONGRESS;

(5) TO A RESEARCHER, ON REQUEST, FOR MEDICAL AND HEALTH CARE RESEARCH IN ACCORDANCE WITH A PROTOCOL APPROVED BY AN INSTITUTIONAL REVIEW BOARD;

(6) IN ACCORDANCE WITH A COST CONTAINMENT CONTRACTUAL OBLIGATION TO VERIFY THAT BENEFITS PAID BY THE NONPROFIT HEALTH SERVICE PLAN WERE PROPER CONTRACTUALLY; OR

(7) TO A THIRD PARTY PAYOR IF:

(I) THE THIRD PARTY PAYOR DOES NOT FURTHER DISCLOSE THE SPECIFIC MEDICAL INFORMATION; AND

(II) THE INFORMATION IS REQUIRED FOR AN AUDIT OF THE BILLING MADE BY THE PLAN TO THE PAYOR.