

**PISGAH LEGAL SERVICES**  
**PRIVACY NOTICE STATEMENT**

This notice explains how Pisgah Legal Services may collect, use, and share your personal information when it assists you with applying for health insurance coverage. Please read it carefully and contact Pisgah Legal Services at 828-210-3404 if you have any questions.

<p>What information will be collected?</p>	<p>We must collect certain information about you, called Personally Identifiable Information (“PII”) in order to help you complete your application for health insurance. PII is information that can be used to identify you or trace your identity. Although this is not a complete list, following are a few examples of PII: <i>Name, address, date of birth, telephone number, email address, household income, and marital status</i>. Your disclosure of this information to us is voluntary but is needed for us to assist you.</p>
<p>How will this information be used?</p>	<p>We will use only the information that we need to help you obtain health insurance through the Affordable Care Act Marketplace and to perform Authorized Functions approved by the Marketplace, or to provide other services to you as allowed by applicable law. Following are the <b>Authorized Functions</b> that we may perform:</p> <ul style="list-style-type: none"> <li>● <i>Helping with your application for health insurance</i></li> <li>● <i>Answering questions about your eligibility</i></li> <li>● <i>Helping to enroll you in a qualified health plan</i></li> <li>● <i>Helping you obtain premium tax credits if you are eligible</i></li> <li>● <i>Helping with filing appeals of eligibility determinations</i></li> <li>● <i>Correcting errors in your health insurance application</i></li> <li>● <i>Other functions that may be approved in writing by the Centers for Medicare &amp; Medicaid Services</i></li> </ul>
<p>Will this information be shared with anyone?</p>	<p>In order to help you enroll in health insurance, we will need to disclose your information to the health plan that you have selected for insurance coverage, as well as to certain federal and state agencies and their subcontractors who are involved in enrolling consumers in health plans.</p>
<p>Will I have an opportunity to consent to the use or disclosure of information?</p>	<p>If we need to use your information for a purpose other than an Authorized Function, listed above, we will provide you with an opportunity to give your informed consent.</p>
<p>Do you keep a record of disclosures, and how can I request a copy of this record?</p>	<p>We are required to keep a list of disclosures pertaining to you only if the disclosure is not related to our Authorized Functions, listed above. You may request a record of disclosures by contacting our team at 828-210-3774.</p>
<p>How will this information be secured?</p>	<p>We store limited contact information on you for appointment purposes, which is secured in our private computer network. If we are entering your application information on your behalf, we are entering it directly into the online Marketplace application and we are not storing it. We also have a privacy and security policy that we follow to make sure we protect your information.</p>
<p>What happens if I don’t share my information with you?</p>	<p>If you do not want to share your information with us, we may not be able to help you enroll in a health insurance plan.</p>
<p>How can I file a complaint regarding the use or disclosure of this information?</p>	<p>If you have a concern about our collection, use, or disclosure of your information, you may file a complaint with our Designated Privacy Official by calling Mike McDonald 828-565-7524 or emailing <a href="mailto:mike@pisgahlegal.org">mike@pisgahlegal.org</a>, or mailing a letter to PO Box 2276, Asheville, NC 28802.</p>