



## MESSAGE FROM PrEP ASSISTANCE PROGRAM NOTICE OF PRIVACY PRACTICES

Effective June 18, 2019

---

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.

---

The Pre-Exposure Prophylaxis Assistance Program (PrEP-AP) must keep your health information private. PrEP-AP receives information about you when you apply for benefits and when your pharmacist sends PrEP-AP a bill for your care. PrEP-AP also receives medical information on your treatment when PrEP-AP approves your care. PrEP-AP must give you this notice about the law and how PrEP-AP can use and share your health information and what your rights are. All information requested by PrEP-AP must be provided in order to participate in PrEP-AP.

### HOW PrEP-AP MAY USE AND SHARE INFORMATION ABOUT YOU

PrEP-AP may only use and share information about you, as required or permitted by law, in the operation of PrEP-AP consistent with California Health and Safety Code section 120972. This information includes things like your name, address, medical history, Social Security number, medical care given to you and other personal information.

PrEP-AP uses this information and shares it with others for the following reasons:

- **For payment:** PrEP-AP and others that work with PrEP-AP review, approve, and pay for pharmacy bills sent to PrEP-AP for your medical care. When PrEP-AP does this, PrEP-AP shares information with the pharmacy benefits manager, pharmacists and doctors and others who bill PrEP-AP for your care.
- **For health care operations:** PrEP-AP may use your health records to check the quality of the prescription drug treatment you receive and to check your medical need to receive restricted PrEP-AP drugs. PrEP-AP may also use this information in audits or fraud investigations, or for planning and managing PrEP-AP.
- **For eligibility determination:** PrEP-AP may share your PrEP-AP information with contractors for the purpose of PrEP-AP administration, including eligibility and enrollment activities.

PrEP-AP may also share your name and Social Security number or individual taxpayer identification number with the California State Franchise Tax Board. This allows PrEP-AP to verify your income from reported tax records and allows us to obtain required financial documentation if you do not have these records.

## SOME OTHER WAYS PrEP-AP MAY SHARE YOUR INFORMATION

The law also allows PrEP-AP to use or disclose information PrEP-AP has about you for the following reasons:

- To contact you about your PrEP-AP benefits.
- When required by state or federal law.
- To agencies that oversee audits or investigations for purposes directly related to PrEP-AP.
- In appeals of decisions about health care claims paid or denied by PrEP-AP.
- To the federal government when it is checking on how PrEP-AP is meeting privacy laws.
- To other government agencies that give public benefits such as Medi-Cal, under specified conditions permitted by law.
- To Federal, State, or private entities for purposes of obtaining reimbursement for services as the payer of last resort; such activities may create an explanation of benefits that could be sent to a primary policyholder who may not be the PrEP-AP client.

PrEP-AP may give out health information about you to organizations that help run PrEP-AP. If PrEP-AP does perform such disclosures, PrEP-AP will protect the privacy of your information that PrEP-AP shares.

Some state laws limit sharing the information listed above. For example, there are special laws, which protect information about HIV/AIDS status, mental health treatment, developmental disabilities, and drug and alcohol abuse care. PrEP-AP will obey these laws.

## WHEN WRITTEN PERMISSION IS NEEDED

If PrEP-AP wants to use or give out personal and health information about you for any reason that is not listed above, PrEP-AP must ask your permission in writing. You may take back your written permission at any time, except if we have already acted because of your permission.

## WHAT ARE YOUR PRIVACY RIGHTS UNDER THE LAW?

You have the right to:

- Ask PrEP-AP not to use or share your personal health care information in the ways listed above. However, PrEP-AP may not be able to honor your request.
- Ask PrEP-AP to contact you in writing only or at a different address, post office box, or by telephone. PrEP-AP will accept reasonable requests if needed for your safety.
- See and get a copy of your PrEP-AP information. You may have someone else see and get a copy of your PrEP-AP information. PrEP-AP has information about your eligibility, your health care bills, and some medical records that PrEP-AP uses to allow or manage your health care services. You will need to pay a fee for PrEP-AP to copy and mail the records. PrEP-AP may keep you from seeing all or parts of your records when the law allows. If PrEP-AP does deny your access request, PrEP-AP will give you information on how to appeal our decision.
- Change the records if you believe some information PrEP-AP has about you is wrong. PrEP-AP may deny your request if the information was not made or kept by PrEP-AP or the information is already correct and complete. If your request is denied, you may write a letter disagreeing with PrEP-AP's decision and your letter will be kept with your records.

---

### IMPORTANT

PrEP-AP DOES NOT HAVE COMPLETE COPIES OF YOUR MEDICAL RECORDS. IF YOU WANT TO LOOK AT, GET A COPY OF, OR CHANGE YOUR MEDICAL RECORDS, PLEASE CONTACT YOUR DOCTOR, CLINIC, OR HEALTH CARE PLAN.

---

- You have the right to ask for a list of the times when PrEP-AP has shared your health information. The list will tell you what information PrEP-AP shared, with whom, when, and for what reasons. The list will not have when PrEP-AP gave information to you, when PrEP-AP had your permission to make a disclosure, or when PrEP-AP shared your information for treatment, payment, or health care operations.
- You have a right to receive a written copy of this Notice of Privacy Practices when you request it. You can also find this notice on our website at: <https://www.cdph.ca.gov/Programs/CID/DOA/Pages/OAadap.aspx>.

## HOW DO YOU CONTACT PrEP-AP TO USE YOUR RIGHTS?

Please call or write PrEP-AP if you want to receive the form(s) you will need to exercise your privacy rights.

---

**ADAP Health Insurance Portability and  
Accountability Act Coordinator**

c/o PrEP-AP

Department of Public Health

MS 7704, P.O. Box 997426

Sacramento, CA 95899-7426

(844) 421-7050

---

You may also contact your PrEP-AP enrollment worker for the forms necessary to exercise your rights.

If you believe that PrEP-AP has not protected your privacy, you may file a complaint by calling or writing to:

---

**Privacy Officer**

California Department of Public Health

Office of Legal Services

Privacy Office

1415 L Street

Suite 500

Sacramento, CA 95814

(877) 421-9634

[privacy@cdph.ca.gov](mailto:privacy@cdph.ca.gov)

---

## COMPLAINTS

You may also call or write the Secretary of the United States (U.S.), Department of Health and Human Services, Office for Civil Rights, 90 7th Street, Suite 4-100, San Francisco, CA 94103, telephone (800) 368-1019, TDD (800) 537-7697, or email at [ocrmail@hhs.gov](mailto:ocrmail@hhs.gov).

PrEP-AP cannot take away your health care benefits, retaliate in any way if you file a complaint, or use any of the privacy rights in this notice.

If you have any questions about this notice, and want more information please contact the California Department of Public Health, Privacy Officer, at the address and telephone number listed above.

## CHANGES TO NOTICE OF PRIVACY PRACTICES

PrEP-AP must obey the rules of this notice. PrEP-AP has the right to make changes to this PrEP-AP Notice of Privacy Practices. If PrEP-AP does make any material changes, PrEP-AP will amend this notice and give it to you right away.

To get a copy of this notice in other languages, Braille, large print, or computer disk, please call or write to PrEP-AP at the phone number or address listed.