

POLICY AND PROCEDURE	
TITLE: Notice of Privacy Practices	
DEPARTMENT POLICY OWNER: Compliance	POLICY #: HPA16
IMPACTED DEPARTMENT(S): Check all departments impacted by this policy	
<input type="checkbox"/> Administration <input type="checkbox"/> Claims <input type="checkbox"/> Compliance <input type="checkbox"/> Customer Service <input type="checkbox"/> External Affairs <input type="checkbox"/> Facilities <input type="checkbox"/> Finance	<input type="checkbox"/> Human Resources <input type="checkbox"/> Information Technology <input type="checkbox"/> Marketing <input type="checkbox"/> Medical Management <input type="checkbox"/> Provider Networks <input type="checkbox"/> Project Management <input checked="" type="checkbox"/> ALL
EFFECTIVE DATE: 04/01/03	REVIEW/REVISION DATE: 03/03, 04/05, 03/12, 06/12, 07/12, 09/14, 04/16, 11/16, 06/17, 11/18; 07/20, 04/21
COMMITTEE APPROVAL DATE: PSOC 09/14 PRC 07/16, 12/16, 07/17, 02/20/19, 10/21 Compliance: 03/25/2019	RETIRE DATE:
PRODUCT TYPE: Medi-Cal	REPLACES:

I. PURPOSE

The Health Plan of San Joaquin (HPSJ) is required to maintain a Notice of Privacy Practices (NPP) in accordance with HIPAA requirements. The HIPAA Privacy Rule gives individuals the right to information on the privacy practices of the HPSJ with regards to the use of personal information.

II. POLICY

- A. HIPAA requires a notice of privacy practices for protected health information (PHI), “an individual has a right to adequate notice of the uses and disclosures of protected health information that may be made by the covered entity, and of the individual's rights and the covered entity's legal duties with respect to protected health information” (45 CFR §164.520).
- B. The Department of Health Care Services (DHCS) Contract requirement to comply with the standards and requirements of HIPAA, the HITECH Act and the HIPAA regulations (DHCS Contract Exhibit G).

- C. HPSJ members have the right to adequate notice of the Uses and Disclosures of PHI that may be made by HPSJ and of the Members' rights and HPSJ's legal duties with respect to PHI.
- D. The HIPAA requirement that a notice be mailed to all active Medi-Cal members upon enrollment and no less than once every three (3) years.
 - a. HPSJ's [Privacy Statement](#) is available online for public view.
- E. The HPSJ describes the types of uses and disclosure that require an authorization.
- F. The HPSJ NPP describes the individual rights.
- G. The HPSJ NPP describes the duties of HPSJ.
- H. The NPP must be written in plain language, and incorporate cultural and linguistic standards set forth by the Department of Health Care Services (DHCS) for Medi-Cal. The NPP should include a tagline in different languages to describe how the member can request an NPP translated into their preferred language.
- I. A covered entity may email the notice to an individual if the individual agrees to receive an electronic notice.
- J. Version control of the NPP is the responsibility of the Chief Compliance Officer. The NPP must have an effective date.
- K. Knowledge of a violation of this policy must be reported to the Compliance Department either in person, via email or anonymously as cited in policy HPA07 Reporting Suspected Security Incidents and Breaches.
- L. The Chief Compliance Officer reviews this policy at least annually and revise as necessary.

III. PROCEDURE

- A. The NPP is available for HPSJ members as follows:
 - 1. By mail to the member's address on file within the new member welcome packet and annually with the Evidence of Coverage (EOC), and upon request.
 - a. Members can request a copy of the NPP, be mailed or emailed to them, by calling HPSJ Customer Service.

- b. Should a material revision be required of the NPP, members are mailed a new NPP within sixty (60) days either as a separate mailing or with the EOC.
 2. The NPP is posted on the HPSJ member website and available to download and/or print.
- B. Members may request and receive a written version of the NPP at any time in the language of their choice with the understanding that it may take some time to translate by an outside vendor.
- C. The NPP includes information about:
1. How HPSJ uses and shares PHI.
 2. How and where PHI is protected within the organization, including but not limited to:
 - a. Staff training on how to use and disclose oral, written and electronic PHI.
 - b. Computers and servers.
 - c. Oral discussions.
 - d. Hardware, including fax machines, printers and copiers.
 - e. IT approved portable media devices, including laptop, tablets, CDs and flash drives.
 - f. Cabinets and offices.
 3. The type of use and disclosure that require authorization.
 4. How the member may request:
 - a. Restrictions on use and disclosure of PHI.
 - b. Amendments to PHI.
 - c. An accounting of disclosures of PHI.
 - d. Access to his or her health information.

5. How the member may file a complaint about privacy issues.
6. HPSJ prompt notification to a member in the event of a breach in accordance with HIPAA regulations and HPSJ policy HPA07 Reporting Suspected Security Incidents and Breaches.

D. Language Requirements

1. The NPP satisfies the “plain language” requirement by making a reasonable effort to:
 - a. Organize material to serve the needs of the reader
 - b. Write short sentences in the active voice
 - c. Use “you” and other pronouns (e.g., you have the right to...)
 - d. Use common, everyday words in sentences
 - e. Divide material into short sections

E. HPSJ retains a copy of all versions of the NPP in accordance with policy CMP02 Records Management and Retention.

IV. ATTACHMENT(S)

A. [HPSJ Notice of Privacy Practices](#)

V. REFERENCES

- A. 22 CCR §53895(a) and §53896
- B. 45 CFR §164.520 – Notice of Privacy Practices
- C. 45 CFR §164.530(j) – Retention Period
- D. 45 CFR Parts §160, §162 and §164 HIPAA Regulations
- E. California Civil Code §1798.29 – Information Practices Act of 1977
- F. California Civil Code §56 - §56.37 – Confidentiality of Medical Information Act
- G. CMP02 Records Management and Retention
- H. DHCS Contract Exhibit G. – Health Insurance Portability and Accountability Act
- I. DHCS Contract, Exhibit A, Attachment 9, §14(B)(2) – Access and Availability
- J. DHCS Notice of Privacy Practices
- K. Health Information Technology for Economic and Clinical Health Act (HITECH Act)
- L. HPA07 Reporting Suspected Security Incidents and Breaches
- M. HPA09 Workforce Sanctions

- N. HPA11 Changes in HIPAA Law
- O. HPA21 Right of member to request restricted use or disclosure of PHI
- P. HPA34 Use of Member PHI
- Q. HPA42 Safeguarding PHI
- R. HPSJ Notice of Privacy Practices
- S. Knox-Keene Act §1364.5
- T. Welfare & Institutions Code §14100.2

VI. REGULATORY AGENCY APPROVALS

DHCS Approved on 9/13/12, and 2/16/17.

VII. REVISION HISTORY

STATUS	DATE REVISED	REVISION SUMMARY
Revised,	11/30/18	The P&P was updated for clarity and placed in the new P&P template.
Review/ Revised	07/29/20	Added the new header template for 2020 Removed detailed, desk level procedures
Reviewed	04/15/21	Annual review, no content changes to the policy. Updated the reference list to include related policies. Included URL link in Attachments to Privacy Statement on HPSJ website for public view.
Reviewed	10/19/21	No further content changes. AG