PLEASANT CARE PHARMACY
1652 B Street
Hayward, CA 94541
Phone: (510) 200-9984
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PATIENT BILL OF RIGHTS & NOTICE OF PRIVACY PRACTICES

Effective Date: July 19, 2013

Welcome to Pleasant Care Pharmacy. We are committed to providing safe, professional, and compassionate pharmacy services while protecting your privacy. This Notice explains your rights as a patient and how your health information may be used and protected under the Health Insurance Portability and Accountability Act (HIPAA) and applicable California laws.

PART I – PATIENT BILL OF RIGHTS

As our patient, you have the right to:

- Be treated with dignity, courtesy, respect, and without discrimination.
- Receive professional pharmacy services in a safe and respectful environment.
- Speak privately with a licensed pharmacist regarding your medications.
- Receive understandable information about your medications, including directions for use, potential side effects, interactions, and storage requirements.
- Participate in decisions regarding your pharmacy care.
- Refuse pharmacy services or counseling after being informed of the possible consequences.
- Receive information regarding prescription costs, insurance co-payments, and other financial responsibilities before medications are dispensed whenever possible.
- Request language assistance or reasonable accommodations whenever available.
- Have your personal and medical information kept confidential.
- Review or request copies of your pharmacy records as permitted by law.
- Request corrections to your pharmacy records when appropriate.
- Request confidential communications or certain restrictions on the use and disclosure of your Protected Health Information (PHI), as permitted by law.
- Receive a paper copy of this Notice at any time.
- File a complaint regarding your care or privacy without fear of retaliation.

PATIENT RESPONSIBILITIES

Patients are responsible for:

- Providing accurate and complete health, allergy, medication, and insurance information.
- Informing the pharmacy of changes to contact information or insurance coverage.
- Following medication directions and asking questions whenever instructions are unclear.
- Paying applicable co-payments and balances.
- Treating pharmacy staff, other patients, and visitors with courtesy and respect.

PART II – NOTICE OF PRIVACY PRACTICES

We are required by HIPAA and California law to protect the privacy of your Protected Health Information (PHI).

We use and disclose your health information to:

- Fill your prescriptions.
- Coordinate care with your healthcare providers.
- Process insurance claims and receive payment.
- Conduct quality assurance and pharmacy operations.
- Provide refill reminders and information about pharmacy services.
- Comply with federal, state, and local laws.
- Respond to public health requirements and medication recalls.
- Cooperate with lawful court orders or government requests when required by law.

We do **not** sell your Protected Health Information.

Uses or disclosures requiring your written authorization will occur only with your permission unless otherwise permitted or required by law.

You may revoke your authorization at any time in writing.

YOUR PRIVACY RIGHTS

You have the right to:

- Inspect and obtain copies of your pharmacy records, as permitted by law.
- Request corrections to inaccurate or incomplete records.
- Request confidential communications.
- Request certain restrictions on disclosures.
- Request an accounting of certain disclosures of your health information.
- Receive a paper copy of this Notice.
- Be notified if your unsecured Protected Health Information is involved in a reportable data breach.

QUESTIONS OR COMPLAINTS

If you have questions regarding your privacy or patient rights, please contact our:
Pharmacist-in-Charge (HIPAA Privacy Official)
Pleasant Care Pharmacy
1652 B Street
Hayward, CA 94541
Phone: (510) 200-9984

If you believe your privacy rights have been violated, you may file a complaint with the Pharmacist-in-Charge or with the U.S. Department of Health and Human Services, Office for Civil Rights. Filing a complaint will not affect your care or services.

A copy of this Notice is available at the pharmacy, on our website, and in paper form upon request.