

Notice of Privacy Practices

Last Updated: July 27, 2020

Building Healthy Online Communities (BHOC), of San Francisco AIDS Foundation, has contracted with Molecular Testing Labs to fulfill and ship your sexual health test kit.

This Notice of Privacy Practices (“Notice”) describes how Molecular Testing Labs (“Molecular”, “we” or “us”) may use and disclose your protected health information (“Protected Health information” or “PHI”), and how you can gain access to this information. Please review this Notice carefully.

Our Privacy Obligations:

We are required by law to protect the privacy of your PHI and to notify you of any breaches of your unsecured PHI. We are also required by law to give you a copy of and follow the terms of this Notice, which sets forth our legal duties and privacy practices with regard to your PHI.

Who is Subject to this Notice:

This notice applies to Molecular, which includes its employees, interns, contractors, and all workforce members who do not fall into a specific category, and medical staff members when providing services at or through Molecular. This Notice covers only the PHI collected, created and maintained by, through or at Molecular. This Notice does not cover the care that you may receive from independent providers outside Molecular or actions by any health plan. Molecular is not responsible for the acts of the other entities that may provide information to us that become a part of your PHI.

Molecular’s laboratory is located at:

<p><i>Laboratory</i> <i>Molecular Testing Labs</i> <i>14401 SE 1st Street</i> <i>Vancouver, WA 98684</i> <i>1-855-MTL-LABS</i></p>	
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Use and Disclosure of Your Protected Health Information:

The following categories describe different ways we use and disclose PHI. Not every use or disclosure in a category will be listed. Generally, except as allowed by law, we restrict access to your information, including nonpublic financial information, to those workforce members who

need to know that information. We maintain physical, electronic and procedural safeguards to protect your information.

Use and Disclosure of Your Protected Health Information for Treatment, Payment and Operations:

Health Care Operations: We may use and disclose your PHI for our operations. These uses and disclosures are necessary, for example, to evaluate the quality of our laboratory testing, accuracy of results, accreditation functions and for Molecular's operation and management purposes. Molecular may also disclose PHI to other healthcare providers or health plans that are involved in your care for their healthcare operations. For example, Molecular may provide PHI to your other health care providers to manage disease, or to coordinate healthcare or health benefits.

Uses and Disclosures We May Make Without Your Authorization:

As Required by Law: We will disclose your PHI when required to do so by federal, state or local law.

Business Associates: We may disclose your PHI to "business associates" with which we contract to perform services on our behalf. BHOc is a BAA.

Public Health Activities: We may disclose your PHI for public health activities, including: to report health information to public health authorities authorized by law to collect information to prevent or control disease, injury, or disability; to report actual or suspected child abuse or neglect to public health authorities authorized by law to receive such reports; to report information about products or services under the jurisdiction of the U.S. Food and Drug Administration activities; to alert a person who may have been exposed to a communicable disease or may be at risk for contracting or spreading a disease or condition, as authorized by law; and to report information to your employer as required under laws addressing work-related illnesses and injuries or workplace medical surveillance.

Victims of Abuse, Neglect, or Domestic Violence: If we reasonably believe you are a victim of abuse, neglect, or domestic violence, we may disclose your PHI to a governmental authority, including a social service or protective services agency, authorized by law to receive reports of such abuse, neglect, or domestic violence.

Health Oversight: We may disclose your PHI to a health oversight agency that oversees the health care system and is charged with responsibility for ensuring compliance with the rules of government health programs, such as Medicare or Medicaid.

Judicial and Administrative Proceedings: We may disclose your PHI in the course of a judicial or administrative proceeding in response to a court or administrative order, subpoena, discovery request or other legal order or lawful process.

Law Enforcement Activities: We may disclose your PHI if asked to do so by a law enforcement official: as required by laws that mandate certain types of reporting; in response to court orders, subpoenas, warrants, summons, grand jury subpoenas, certain administrative requests, or similar processes; to identify or locate a suspect, fugitive, material witness, or missing person (but we will give only limited information); about the victim of a crime in certain circumstances; about a death we believe may be the result of criminal conduct; about criminal conduct on our premises; and, in emergencies, to report a crime, the location of the crime or victims, or the identity, description, or location of the person who committed the crime.

Coroners, Medical Examiners and Funeral Directors: We may disclose your PHI to a medical examiner or coroner as necessary or required to identify a deceased person or determine the cause of death. We also may disclose your PHI to funeral directors so they can perform their duties.

Organ and Tissue Donations: We may disclose your PHI to authorized organizations as required or needed for organ, eye, or tissue donation and transplants.

Research: Under certain circumstances, we may use and disclose your PHI for research purposes without your consent or authorization, such as if an Institutional Review Board or Privacy Board approves a waiver or authorization for disclosure. Most of the time, the provider conducting the research or Molecular will ask for your authorization.

To Avert a Serious or Imminent Threat to Health or Safety: We may use and disclose your PHI when we reasonably believe it is necessary to prevent or lessen a serious or imminent threat to the health and safety of you, the public or another person. The disclosure would only be to someone who is likely to help prevent or lessen the threat, such as law enforcement.

Workers' Compensation: We may disclose your PHI as authorized by and to the extent necessary to comply with state law relating to workers' compensation or similar programs.

National Security, Intelligence Activities, Protective Services and Military Personnel: We may disclose your PHI to authorized federal officials for intelligence, counterintelligence, special investigations, and other national security activities authorized by law or to protect the President or other authorized persons. If you are a member of the armed forces, we may disclose your PHI as required by your military command authorities.

Inmates: We may disclose PHI about an individual who is an inmate or is in custody to a correctional institution or law enforcement official.

Affiliated Covered Entities: We may share PHI with providers who are “affiliated covered entities” of Molecular. These are entities with which Molecular has common ownership or control.

Incidental Disclosures: Certain incidental disclosures of your PHI may occur as a by-product of permitted uses and disclosures.

De-identified Information and Limited Data Sets: We may use and disclose your PHI that has been “de-identified” by removing certain identifiers (such as name and address) making it unlikely that you could be identified. We also may disclose limited PHI, contained in a “limited data set,” as allowed by law.

Personal Representatives: Minors and incapacitated adults may have “personal representatives”. These personal representatives may be able to act on the individual’s behalf and exercise the individual’s privacy rights

Uses and Disclosures We May Make with Authorization:

Your Authorization: Other uses and disclosures of your PHI not covered by this Notice or permitted by law will be made only with your written authorization. These types of uses and disclosures include psychotherapy notes, or uses or disclosures for the purposes of marketing or for the sale of your PHI.

Specially Protected Health Information: Federal and state law requires special privacy protections of certain highly confidential information about you. Unless otherwise required or permitted by law, we may need your authorization to disclose the subsets of your PHI regarding: (1) testing, diagnosis, or treatment for AIDS/HIV/ARC; (2) mental health and developmental disabilities services; (3) drug, alcohol, or other substance abuse prevention, treatment and referral; (4) sexually transmitted diseases; (5) genetic information or records; (6) child abuse and neglect; (7) domestic abuse of an adult with a disability; (8) sexual assault, and (9) PHI maintained in psychotherapy notes.

Revocation of your Authorization. You may revoke your authorization, in writing, at any time, (unless you are told otherwise at the time you sign the authorization) by delivering a written statement to the Privacy Officer identified in this Notice. If you revoke your authorization, then we will no longer use or disclose your PHI for the reasons covered by your authorization, except to the extent that we already have relied on your authorization. We are unable to take back any disclosures we already have made based on your authorization, and we are required to retain our records of the care that we provided to you.

Your Rights Regarding Your Protected Health Information

You have the rights described below:

Right to Inspect and Copy: You have the right to inspect and obtain copies of your PHI that we may use to make decisions about your care. You also have the right to inspect and obtain copies of completed laboratory reports or results directly from Molecular's laboratories in Molecular's networks and at Molecular. We may deny your request in certain limited circumstances. To inspect or obtain a copy of your PHI, you must submit your request in writing to Molecular's Privacy Officer identified in this Notice.

Right to Amend: If you feel that PHI we have about you is incorrect or incomplete, then you have the right to request an amendment for as long as we keep this information. Molecular cannot amend records we did not create or author. We may deny your request in certain situations. To request an amendment, you must submit your request on a designated form to the Privacy Officer. You will be notified in writing within 60 days of your request if we do not agree to your request.

Right to an Accounting of Disclosures: You have the right to request an accounting of certain disclosures of your PHI made by us. To request this list or accounting, you must submit your request on a designated form to the Privacy Officer.

Right to Request Restrictions: You have the right to request a restriction or limitation on the PHI we use about you for treatment, payment or healthcare operations. You also have the right to request a limit on the PHI we disclose about you to someone who is involved in your care or the payment for your care. To request a restriction, you must submit your request on a designated form to the Privacy Officer. You are entitled to a restriction, upon request, to not disclose information to your health plan for health care services we provided and for which you paid us directly in full when the purpose of the disclosure is for the health plan's payment or health care operations and is not otherwise required by law and the PHI pertains solely to the health care item or service for which you or a person on your behalf of has paid us in full. We are not required to agree to other types of requests. If we do agree, we will comply with your request unless the information is needed to provide you with emergency treatment.

Right to Request Confidential Communications: You have the right to request that we communicate with you about health matters in a certain way or at a certain location. To request confidential communications regarding billing, you must submit our designated form to the Accounting Department identified in this notice or the Privacy Officer. To request confidential communications regarding your PHI, you must submit a designated form to the Privacy Officer. We will agree to the request if it is reasonable for us to do so.

Right to a Copy of this Notice: You have the right to receive a written copy of this Notice (even if you agreed to receive this Notice electronically). Copies of the Notice are available at the

reception desk or from the Privacy Officer. You may print a copy of this Notice from our website at www.moleculartestinglabs.com.

Changes To This Notice:

We reserve the right to change this Notice. The revised Notice will be effective for information we already have about you as well as any information we receive in the future. Unless required by law, the revised Notice will be effective on the new effective date of the Notice. The current Notice will be available in lab locations or on our websites and will be posted in our facilities. The Notice will state an effective date.

Complaints:

If you believe that your privacy rights have been violated, you may complain to the Privacy Officer by calling (toll free) 1-855-MTL-LABS or the Molecular Testing Labs Hot Line (toll free) at 855-400-6002 or at www.lighthouse-services.com/moleculartestinglabs. You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-6966775, or visiting www.hhs.gov/ocr/privacy/hipaa/complaints/. We will not retaliate against you for filing a complaint.

Questions:

If you have questions, please contact our Privacy Officer at 1-855-MTL-LABS.

Contact Information:

Privacy Officer

1-855-MTL-LABS

Compliance@moleculartestinglabs.com