

DEPARTMENT OF HEALTH AND HUMAN SERVICES OFFICE FOR CIVIL RIGHTS (OCR)

See OMB Statement on Reverse.

Form Approved: OMB No. 0990-0269.



HEALTH INFORMATION PRIVACY COMPLAINT

YOUR FIRST NAME		YOUR LAST NAME	YOUR LAST NAME		
(b)(6);(b)(7)(C)		(b)(6);(b)(7)(C)	(b)(6);(b)(7)(C)		
HOME / CELL PHONE (Please include	area code)	WORK PHONE (Plea	WORK PHONE (Please include area code)		
(b)(6);(b)(7)(C)					
STREET ADDRESS		L	CITY		
(b)(6);(b)(7)(C)			(b)(6);(b)(7)(C)		
STATE	ZIP	E-MAIL ADDRESS (If av			
(b)(6);(b)(7)(C)	(b)(6);(b)(7)(C				
Are you filing this complaint for		X No			
	If Yes, whose health informatio		believe were violated?		
Who (or what agency or organization information privacy rights or commit PERSON/AGENCY/ORGANIZATION			r (or someone else's) health		
Planned Parenthood			OLTY		
STREET ADDRESS			CITY		
1691 The Alameda			San Jose		
STATE	ZIP	PHONE (Please include area code)			
California	95126				
When do you believe that the vic LIST DATE(S)	plation of health information p	orivacy rights occurre	d?		
10/17/2016					
Describe briefly what happened. How violated, or the privacy rule otherwise.					
an in clinic procedure. On having a discussion in which disclosed my medical information of the control of the	On the afternoon of Octorich he disclosed to me primation about that proceeding their Human Resource deposed they would be able and information and they numan resource department my procedure done at truncated due to size limited.	that he had a fracedure to him the partment and was to see it. Yester were still invest that my former because he is not it. See the "Allega"	onte office in Stockton, and recieved 2 pm me and my former partner were iend at Planned Parenthood who day before which would be October told they would investigate and if my rday October 26 I recieved a letter tigating and would contact me in a partners friend may not work at the t from California he is from tion Description" file in the case folder.		
-	do not need to sign if submitting this	form by email because sub	mission by email represents your signature.		
SIGNATURE			DATE (mm/dd/yyyy)		
(b)(6);(b)(7)(C)			10/27/2016		
Filing a complaint with OCR is volu	ıntary. However, without the info	ormation requested abo	ove, OCR may be unable to proceed with your		

Filing a complaint with OCR is voluntary. However, without the information requested above, OCR may be unable to proceed with your complaint. We collect this information under authority of the Privacy Rule issued pursuant to the Health Insurance Portability and Accountability Act of 1996. We will use the information you provide to determine if we have jurisdiction and, if so, how we will process your complaint. Information submitted on this form is treated confidentially and is protected under the provisions of the Privacy Act of 1974. Names or other identifying information about individuals are disclosed when it is necessary for investigation of possible health information privacy violations, for internal systems operations, or for routine uses, which include disclosure of information outside the Department for purposes associated with health information privacy compliance and as permitted by law. It is illegal for a covered entity to intimidate, threaten, coerce, discriminate or retaliate against you for filing this complaint or for taking any other action to enforce your rights under the Privacy Rule. You are not required to use this form. You also may write a letter or submit a complaint electronically with the same information. To submit an electronic complaint, go to OCR's Web site at:

www.hhs.gov/ocr/privacy/hipaa/complaints/index.html. To mail a complaint see reverse page for OCR Regional addresses.

On September 9th at 12:20 I went to Planned Parenthood the Mar Monte office in Stockton, and recieved an in clinic procedure. On the afternoon of October 18 at about 2 pm me and my former partner were having a discussion in which he disclosed to me that he had a friend at Planned Parenthood who disclosed my medical information about that procedure to him the day before which would be October 17. I proceeded to call their Human Resource department and was told they would investigate and if my files where in fact accessed they would be able to see it. Yesterday October 26 I recieved a letter saying I gave them limited information and they were still investigating and would contact me in a few weeks. I told their human resource department that my former partners friend may not work at the specific clinic that I got my procedure done at because he is not from California he is from Philidelphia so she might work there but either way I was told that wouldn't matter because they would be able to see where it came from. In terms of the information I provided them with about this incident I gave them my appointment time and date, and also provided them with his full name and his information that I still had, I also proceeded to tell them that he would not cooperate because he was already threatening me for filing a complaint with them. From my understanding this violates the HIPAA laws if it is true that my information was discolsed to anyone without my consent or without me knowing.





DEPARTMENT OF HEALTH & HUMAN SERVICES

Voice - (800) 368-1019 TDD - (202) 619-3257 Fax - (202) 619-3818 http://www.hhs.gov/ocr

Office for Civil Rights 200 Independence Avenue, S.W., Room 509F Washington, DC 20201

November 17, 2016

Planned Parenthood Federation of America 123 William Street New York, NY 10038 Attn: Privacy Officer

Re: OCR Transaction Number: CU-17-252928

Dear Privacy Officer:

On October 27, 2016, the U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR), received a complaint alleging that Planned Parenthood, the covered entity, has violated the Federal Standards for Privacy of Individually Identifiable Health Information (45 C.F.R. Parts 160 and 164, Subparts A and E, the Privacy Rule). Specifically, the complainant, (b)(6)(b)(7)(C) alleges that on October 17, 2016, an employee of Planned Parenthood, located at 1691 The Alameda, San Jose, CA 95126, impermissibly disclosed her protected health information (PHI) to her ex-boyfriend, an individual unrelated to her care. This allegation could reflect a violation of 45 C.F.R. §§ 164.502(a), 164.510 (b), and 164.530(c).

OCR enforces the Privacy, Security, and Breach Notification Rules, and also enforces the Federal civil rights laws which prohibit discrimination in the delivery of health and human services because of race, color, national origin, disability, age, and under certain circumstances, sex and religion.

Pursuant to the Privacy Rule, a covered entity may not use or disclose protected health information (PHI) except as permitted or required by the Privacy Rule. As long as an individual does not object, a covered entity is allowed to share or discuss the individual's health information with the individual's family, friends, or others involved in the individual's care or payment for their care. The covered entity may ask the individual's permission, may tell the individual that the covered entity plans to discuss the information and give the individual an opportunity to object, or may decide, using the covered entity's professional judgment, that the individual does not object. However, in any of these cases, the covered entity may discuss <code>only</code> the information that the person involved needs to know about the individual's care or payment for their care.

The minimum necessary provision of the Privacy Rule also requires the covered entity to limit access to protected health information by identifying the persons or classes of persons within the covered entity who need access to the information to carry out their job duties, the categories or types of protected health information needed, and conditions appropriate to such access.

Finally, a covered entity must provide a process for individuals to make complaints concerning the covered entity's policies and procedures required by the Privacy Rule or its compliance with such policies and procedures or with the requirements of the Privacy Rule. 45 C.F.R. § 164.530 (d)(1).

In this matter, the complainant alleges that the complainant's PHI was impermissibly disclosed to a member of the complainant's family or to an acquaintance of the complainant or that the complainant's PHI was otherwise impermissibly used by an employee of Planned Parenthood. Pursuant to its authority under 45 C.F.R. §§ 160.304(a) and (b), OCR has determined to resolve this matter through the provision of technical assistance to Planned Parenthood. To that end, OCR has enclosed material explaining the Privacy Rule provisions related to Disclosures to Family and Friends, the Minimum Necessary Requirement, and Reasonable Safeguards.

It is our expectation that you will review these materials closely and share them with your staff as part of the Health Insurance Portability and Accountability Act (HIPAA) training you provide to your workforce. It is also our expectation that you will assess and determine whether there may have been an incident of noncompliance as alleged by the complainant in this matter, and, if so, to take the steps necessary to ensure such noncompliance does not occur in the future. Please contact OCR if you need further information regarding the allegations in this matter. Should OCR receive a similar allegation of noncompliance against Planned Parenthood in the future, OCR may initiate an investigation of that matter.

Based on the forgoing, OCR is closing this case without further action, effective the date of this letter. OCR's determination as stated in this letter applies only to the allegations in this complaint that were reviewed by OCR.

Under the Freedom of Information Act, we may be required to release this letter and other information about this case upon request by the public. In the event OCR receives such a request, we will make every effort, as permitted by law, to protect information that identifies individuals or that, if released, could constitute a clearly unwarranted invasion of personal privacy.

If you have any questions regarding this matter, please contact Elizabeth Guest, Investigator, at (202) 619-1587 (Voice) or (202) 619-3257 (TDD).

Sincerely,

reggy Lee

Reggy Ree

Acting Chief, Centralized Case Management Operations (CCMO)

Enclosure: Disclosures to Family and Friends

The Minimum Necessary Requirement

Reasonable Safeguards





DEPARTMENT OF HEALTH & HUMAN SERVICES

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Office for Civil Rights 200 Independence Avenue, S.W., Room 509F Washington, DC 20201

November 17, 2016

(b)(6);(b)(7)(C)			

Re: OCR Transaction Number: CU-17-252928

Dear (b)(6);(b)(7)(C)

On October 27, 2016, the U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR), received your complaint alleging that Planned Parenthood, the covered entity, has violated the Federal Standards for Privacy of Individually Identifiable Health Information (45 C.F.R. Parts 160 and 164, Subparts A and E, the Privacy Rule). Specifically, you allege that on October 17, 2016, an employee of Planned Parenthood, located at 1691 The Alameda, San Jose, CA 95126, impermissibly disclosed your protected health information (PHI) to your ex-boyfriend. This allegation could reflect a violation of 45 C.F.R. §§ 164.502(a), 164.510 (b), and 164.530(c).

Thank you for bringing this matter to OCR's attention. Your complaint plays an integral part in OCR's enforcement efforts.

OCR enforces the Privacy, Security, and Breach Notification Rules, and also enforces the Federal civil rights laws which prohibit discrimination in the delivery of health and human services because of race, color, national origin, disability, age, and under certain circumstances, sex and religion.

A covered entity may not use or disclose protected health information except as permitted or required by the Privacy Rule. As long as an individual does not object, a covered entity is allowed to share or discuss with the individual's family, friends, or other persons identified by the individual the protected health information that is directly relevant to such person's involvement with the individual's care or payment for care. The covered entity may ask the individual's permission, may tell the individual that the covered entity plans to discuss the information and give the individual an opportunity to object, or may decide, using the covered entity's professional judgment, that the individual does not object. However, in any of these cases, the covered entity may discuss **only** the information that the person involved needs to know about the individual's care or payment for their care.

The minimum necessary provision of the Privacy Rule also requires the covered entity to limit access to protected health information by identifying the persons or classes of persons within the covered entity who need access to the information to carry out their job duties, the categories or types of protected health information needed, and conditions appropriate to such access.

Finally, a covered entity must provide a process for individuals to make complaints concerning the covered entity's policies and procedures required by the Privacy Rule or its compliance with such policies and procedures or with the requirements of the Privacy Rule. 45 C.F.R. § 164.530 (d)(1).

We have carefully reviewed your complaint against Planned Parenthood and have determined to resolve this matter through the provision of technical assistance to Planned Parenthood. Should OCR receive a similar allegation of noncompliance against Planned Parenthood in the future, OCR may initiate an investigation of that matter.

Based on the foregoing, OCR is closing this case without further action, effective the date of this letter. OCR's determination as stated in this letter applies only to the allegations in this complaint that were reviewed by OCR.

Under the Freedom of Information Act, we may be required to release this letter and other information about this case upon request by the public. In the event OCR receives such a request, we will make every effort, as permitted by law, to protect information that identifies individuals or that, if released, could constitute a clearly unwarranted invasion of personal privacy.

If you have any questions about this matter, please contact Centralized Case Management Operations at (800) 368-1019 or (202) 619-3257 (TDD).

Sincerely yours,

Reggy Rec

Peggy Lee

Acting Chief, Centralized Case Management Operations (CCMO)

English	If you speak a non-English language, call 1-800–368–1019 (TTY: 1-800-537-7697), and you will be connected to an interpreter who will assist you with this document at no cost.
Español - Spanish	Si usted habla español marque 1-800-368-1019 (o a la línea de teléfono por texto TTY 1-800-537-
	7697) y su llamada será conectada con un intérprete que le asistirá con este documento sin costo
	alguno.
中文 - Chinese	如果你讲中文,请拨打1-800-368-1019(打字电话:1-800-537-7697), 你将被连接到一位讲同
	语种的翻译员为你提供免费服务。
Tiếng Việt - Vietnamese	Nếu bạn nói tiếng Việt, xin gọi 1-800-368-1019 (TTY: 1-800-537-7697), và bạn sẽ được kết nối với
	một thông dịch viên, người này sẽ hỗ trợ bạn với tài liệu này miễn phí.
한국어 - Korean	한국어를 하시면 1-800-368-1019 (청각 장애용: 1-800-537-7697) 로 연락 주세요. 통역관과
	연결해서 당신의 서류를 무료로 도와 드리겠습니다.
Tagalog (Filipino)	Kung ikaw ay nagsasalita nang Tagalog, tumawag sa 1-800-368-1019 (TTY: 1-800-537-7697) para
	makonek sa tagapagsalin na tutulong sa iyo sa dokumentong ito na walang bayad.
Русский - Russian	Если вы говорите по- русски, наберите 1-800-368-1019. Для клиентов с ограниченными
	слуховыми и речевыми возможностями: 1-800-537-7697), и вас соединят с русскоговорящим
	переводчиком, который вам поможет с этим документом безвозмездно.