Contents

WELCOME .................................................................................................................................................. 4

OUR VISION ............................................................................................................................................... 4
OUR MISSION ............................................................................................................................................... 4
AT OUR PHARMACIES WE BELIEVE....................................................................................................... 4

LOCATIONS AND HOURS OF OPERATION ............................................................................................... 4

AUSTIN, TEXAS ......................................................................................................................................... 4
DENVER, COLORADO ................................................................................................................................. 4
KANSAS CITY, MISSOURI .......................................................................................................................... 4
MADISON, WISCONSIN ............................................................................................................................. 4
MILWAUKEE, WISCONSIN ......................................................................................................................... 4
SAINT LOUIS, MISSOURI ........................................................................................................................ 5
HOLIDAYS ................................................................................................................................................ 5

SERVICES PROVIDED ............................................................................................................................... 5

SERVICE AREA ........................................................................................................................................ 5
PATIENT ELIGIBILITY ............................................................................................................................... 5
SPECIALTY AND NON-SPECIALTY MEDICATIONS ................................................................................ 5
OBTAINING YOUR MEDICATIONS ........................................................................................................ 5
PRESCRIPTION DELIVERY ..................................................................................................................... 5
FINANCIAL ASSISTANCE ......................................................................................................................... 6
MEDICATION EDUCATION AND COUNSELING .................................................................................. 6
MEDICAL HOME SERVICES .................................................................................................................... 6
MEDICATION ADHERENCE TOOLS ......................................................................................................... 6
REFILL MANAGEMENT PROGRAM ......................................................................................................... 6
MEDICATION REPOSITORY ..................................................................................................................... 6
COST OF SERVICES ................................................................................................................................. 6

SERVICES NOT AVAILABLE AT OUR PHARMACIES ........................................................................... 7

MEDICARE PART B COVERED MEDICATIONS AND SUPPLIES ............................................................. 7
VETERINARY MEDICINE FOR PETS/ANIMALS ...................................................................................... 7

IMPORTANT INFORMATION ..................................................................................................................... 7

PRESCRIPTION SUBSTITUTIONS .............................................................................................................. 7
TRANSFERRING A PRESCRIPTION ......................................................................................................... 7
MEDICATIONS NOT AVAILABLE AT THIS PHARMACY ....................................................................... 8
BILLING AND PAYMENT PROCESS ....................................................................................................... 8
EMERGENCY 24/7 ACCESS ...................................................................................................................... 8
HOW TO ACCESS MEDICATIONS IN CASE OF AN EMERGENCY OR DISASTER ................................ 8
HOW TO REPORT A CONCERN ................................................................................................................ 9
STATE AND FEDERAL AGENCY CONTACT INFORMATION ................................................................. 9

PATIENT SAFETY ..................................................................................................................................... 9

MEDICATION RECALLS ........................................................................................................................... 9
ADVERSE DRUG REACTIONS ................................................................................................................ 9
POISONING ............................................................................................................................................... 9
<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>PATIENT EDUCATION</td>
<td>10</td>
</tr>
<tr>
<td>INFECTION PREVENTION</td>
<td>10</td>
</tr>
<tr>
<td>HAND WASHING</td>
<td>10</td>
</tr>
<tr>
<td>DRUG STORAGE AND DISPOSAL</td>
<td>11</td>
</tr>
<tr>
<td>EMERGENCY PREPAREDNESS</td>
<td>12</td>
</tr>
<tr>
<td>ADHERENCE TIPS</td>
<td>13</td>
</tr>
<tr>
<td>THE JOURNEY TO UNDETECTABLE</td>
<td>14</td>
</tr>
<tr>
<td>VIVENT HEALTH PATIENT POLICIES</td>
<td>16</td>
</tr>
<tr>
<td>VIVENT HEALTH PATIENT NOTICE OF PRIVACY PRACTICES</td>
<td>16</td>
</tr>
<tr>
<td>PATIENT RIGHTS AND RESPONSIBILITIES</td>
<td>22</td>
</tr>
<tr>
<td>PATIENT GRIEVANCE POLICY AND PROCEDURE</td>
<td>24</td>
</tr>
</tbody>
</table>
Welcome to Vivent Pharmacy

Vivent Pharmacy is a full-service HIV pharmacy with multiple locations nationwide. Our pharmacies are customized to meet the needs of people living with, and at risk for, HIV. Our expert pharmacists are specialists with advanced training, knowledge, and experience in HIV care. The Vivent Pharmacy team is committed to helping you thrive in your treatment plan through ongoing, patient-centered support.

Our dedicated pharmacists work closely with you and your health care provider to make sure you have the best medications to meet your individual needs. We also offer assistance to make your medications more affordable, and a host of other services that make our pharmacy an easy, hassle-free choice.

OUR VISION

Vivent Health envisions a world without AIDS and strives to ensure everyone with HIV lives a long and healthy life.

OUR MISSION

To be a relentless champion for people affected by HIV and do all we can to help them thrive, because we believe every person has value and should be treated with respect.

At Our Pharmacies We Believe...

- in providing the highest quality pharmacy care
- in maximizing your health while minimizing your out-of-pocket costs
- support and adherence are hallmarks to positive care
- all patients deserve to be treated with respect and dignity
- in including all our services in our standard of care at no additional cost

Locations and hours of operation

Austin, Texas
6505 Airport Blvd., Suite 100A
Austin, TX 78752
Phone: 512-220-7609
Toll Free: 1-833-366-6664
Text: 737-237-2418
Hours: Monday-Friday 9:00 am- 5:00 pm

Denver, Colorado
5250 Leetsdale Drive Suite 300
Denver, CO 80246
Phone: 303-321-0436
Toll Free: 1-800-483-0380
Text: 720-903-4545
Hours: Monday-Friday 9:00 am- 5:00 pm

Kansas City, Missouri
4309 E 50th Terrace Suite 200A
Kansas City, MO 64130
Phone: 866-454-8029
Toll Free: 866-454-8029
Text: 816-677-6048
Hours: Monday-Friday 8:30 am – 5:00 pm

Madison, Wisconsin
600 Williamson St. Suite H
Madison, WI 53703
Phone: 608-316-8612
Toll Free: 1-844-342-7294
Text: 608-200-3050
Monday-Friday 8:30 am-5:00 pm

Milwaukee, Wisconsin
820 N. Plankinton Ave.
Milwaukee, WI 53203  
Phone: 414-223-6820  
Toll Free: 1-800-359-9272 Ext. 6820  
Text: 414-246-0405  
Hours: Monday-Thurs 8:30 am- 5:30 pm  
Friday 8:30 am- 5:00 pm

Saint Louis, Missouri  
2653 Locust St.  
Saint Louis, MO 63103  
Phone/Toll free: 855-751-8878  
Text: 314-710-2438  
Hours: Monday-Friday 8:00 am- 5:30 pm

HOLIDAYS
All Vivent Locations are closed or have reduced hours on the following HOLIDAYS:

- New Year’s Day
- Martin Luther King Jr Day
- Memorial Day
- Juneteenth
- Independence Day
- Labor Day
- Thanksgiving
- Friday after Thanksgiving (closed after noon)
- Christmas Eve (closed after noon)
- Christmas Day
- New Year’s Eve (closed after noon)

Services Provided

Service Area
Vivent Pharmacy currently serves patients claiming residency in the states of Colorado, Missouri, Wisconsin, and Texas.

Patient Eligibility
All people living with HIV and those taking Pre-Exposure Prophylaxis (PrEP) are eligible to use our pharmacies regardless of where they receive their medical care.

Specialty and Non-Specialty Medications
We are a full-service outpatient retail pharmacy. We can fill both your specialty and non-specialty medications.

Obtaining your medications
To begin filling prescriptions at our pharmacy, please contact the location nearest to you in your state of residence. A member of our staff will assist you with new patient intake. For information on transferring in your prescription to Vivent from another pharmacy. (see the section Transferring a prescription)

Picking up your prescriptions is an option at all our locations. Parking is free at all our locations for all patients.

Prescription Delivery
Complimentary monthly medication courier services delivery your medication to your preferred address. Call your pharmacy for more information on courier options in your area. UPS and US Mail options are also available free of charge to our patients. Specific delivery services vary upon location.

We will work with you to arrange delivery based on your preferences and needs.
Financial Assistance
We will explore all options to help you pay the least amount of money out of pocket for your medications. Our pharmacy staff are skilled in utilizing resources such as copayment assistance cards, patient assistance foundations, and state and local programs.

Medication education and counseling
We offer One-on-one consultation to help you overcome medication side effects, drug interactions, and to help you reach your healthcare goals. Private consultation rooms are available at your request. Pharmacists are available to you via phone, text message, in person, or via email during all open pharmacy hours. (For after-hours support, See the section on Emergency Access)

Medication Adherence tools
We provide tools to help make taking your medications as easy as possible such as free pill boxes, pill splitters, and keychain pill holders.

Refill Management Program
All our patients who receive a specialty medication are automatically enrolled in personalized refill reminders every month, so you never need to worry about running out of your medications. These refill reminders can be in the form of a phone call or text message based on your personal communication preferences.

Medical Home services
Vivent Pharmacies are part of the Medical Home model of care. Other medical home services at Vivent include

- Food Pantry,
- Case Management,
- Medical Care,
- Insurance Specialist Advising,
- Dental Services,
- Mental Health Services,
- Legal Services,
- Needle exchange, and
- PrEP (Pre-Exposure Prophylaxis) services.

Pharmacy staff will work together with you and your care team to create a dynamic plan of care. You are encouraged to participate! Ask a staff member for care plan details or medical home services available to you in your area.

In addition, we are pleased to share that all the profits generated at our pharmacies are reinvested to expand our medical home services.

Medication Repository
If you have unopened and unexpired antiretroviral medications that you would like to donate back to the pharmacy, please ask our staff about our Repository Program. Donated repository medications can be made available to patients with valid prescriptions but inadequate medication coverage. Note: Repository programs are only available in some states, please contact our billing specialists for more information. 414-225-1613.

Cost of Services
All our pharmacy services are free of charge for eligible patients.
Services not available at our pharmacies

Medicare part B covered medications and supplies

Our pharmacies are not authorized providers of Medicare Part B Medical Supplies. If you have Medicare, we can fill your Medicare part D covered medication and we will assist you in finding a convenient pharmacy who can assist you with the Medicare B covered items.

Items covered by Medicare B may include:

- Diabetic test strips,
- Diabetic glucometers,
- Nebulizer machines,
- Nebulizer solutions,
- And any items considered as Durable Medical Equipment, Prosthetics, Orthotics, and supplies (DMEPOS).

Veterinary Medicine for pets/animals

We are unable to fill veterinary medications for animals and pets.

Important Information

Placing a prescription order or refill

You have several options for requesting a refill of your medication. You may call your pharmacy directly (see locations). You can also request a refill by sending the pharmacy a text message and one of our staff will be in direct communication with you. Medications may also be requested using the MyChart application or website. Please ask your pharmacy for more information and directions on using MyChart.

You may request a refill outside of pharmacy business hours. Text messages, Voicemails, and MyChart requests sent outside of normal business hours will be addressed on the next open business day. (See Emergency 24/7 Access) (Locations and hours of operation)

Prescription Substitutions

If you are curious about a medication substitution, please call your local pharmacist.

Transferring a prescription

To transfer a prescription TO our pharmacy: Tell any member of our pharmacy staff the following about the pharmacy you want the medications transferred FROM:

- Pharmacy Name
- Pharmacy Phone Number
- Names or description of medications to be transferred.
- We may need to request a new prescription from your medical provider.

To transfer a prescription FROM our pharmacy to another pharmacy: Ask the new pharmacy to call us and request a transfer. Give them our pharmacy name, pharmacy phone number, and names or descriptions of medications to be transferred.
Medications not available at this pharmacy

We will try to order almost any medication you may need. However, if there is a medication we cannot make available to you at our pharmacy, we will work with you to find the most convenient pharmacy to you to enable access to the medications you need.

Billing and payment process

The pharmacy will bill your insurance to determine the amount you may owe for copayment or coinsurance. This amount is determined by the insurance company.

Please contact your pharmacy if you need financial assistance. (See Financial Assistance).

To pay an amount due or for questions regarding billing statements please contact the billing department at 414-225-1613

Emergency 24/7 Access

If you have a pharmacy emergency after business hours, please call 1-800-359-9272 and follow the prompts to speak to the on-call clinician. The clinician will forward communication to a pharmacist as necessary.

How to access medications in case of an emergency or disaster

We have pharmacy locations in multiple cities. If there is a natural emergency or disaster that requires your local pharmacy to be unavailable, we may use one of our other locations to fill your medications and ship to the address of your choice. (See Emergency 24/7 Access section for getting in touch with the pharmacy after hours). (See Emergency Preparedness for information on preparing for emergencies).

We can work with insurance or other programs to get you a replacement fill of medications that may have been lost or damaged if your area has been declared to be in a disaster zone.

Our organization’s policy on inclement weather is to close offices when the local public school district is closed due to unsafe weather conditions. You can be alerted to our closing by checking our website, Facebook page, or calling the pharmacy.

If you have a missed dose or missed delivery, please contact your local pharmacist to determine the best plan of action.

If you are having symptoms of severe allergic reaction to a medication, symptoms such as: shortness of breath, difficulty breathing, or swelling in the face:

CALL 911
and get immediate emergency help.
How to Report a Concern

Please contact our pharmacy staff to discuss any concerns. Pharmacy Managers are available daily at all pharmacy locations, and Pharmacy Supervisors are available upon request.

State and Federal Agency Contact Information

Local State Board of Pharmacy:
- Colorado: 303-894-7800
- Missouri: 573-751-0091
- Wisconsin: 608-266-2112
- Texas: 512 -305-8000

Accreditation Commission for Health Care (ACHC)
- 855- 937-2242

FDA MedWatch
- 800-FDA-1088

Poison Control Hotline
- 800-222-1222

Patient Safety

Medication Recalls

Our pharmacies follow all FDA medication recall regulations.

If a Drug Manufacturer or the FDA issues a medication recall that requires action, the pharmacy will reach out to you to notify you that you have received a recalled product and we will work with you to create an action plan.

For more information on current FDA drug recalls visit the FDA’s website:
www.fda.gov/safety/recalls-market-withdrawals-safety-alerts

Adverse Drug Reactions

If you are having symptoms of severe allergic reaction to a medication, symptoms such as: shortness of breath, difficulty breathing, swelling in the face CALL 911 and get immediate emergency help.

Call your doctor if you have concerns about a side effect or reaction to a medication. A pharmacist is also available at every location to help educate and guide you on medication side effects. (See section Medication education and counseling.)

You can report side effect to the FDA at 1-800-FDA-1088

Poisoning

Keep all hazardous materials and liquids out of reach of children.

Know your local poison control number or call 1-800-222-1222 if a poisoning occurs
PATIENT EDUCATION

Infection Prevention

Stop the Spread of Germs

Help prevent the spread of respiratory diseases like COVID-19.

6 ft
Stay at least 6 feet (about 2 arm lengths) from other people.

Cover your cough or sneeze with a tissue, then throw the tissue in the trash and wash your hands.

When in public, wear a mask over your nose and mouth.

Do not touch your eyes, nose, and mouth.

Clean and disinfect frequently touched objects and surfaces.

Stay home when you are sick, except to get medical care.

Wash your hands often with soap and water for at least 20 seconds.

For more information on infection prevention visit the CDC website: https://www.cdc.gov/
Drug storage and disposal

Tips on Safe Storage and Disposal of Your Prescription Medicines
National Council on Patient Information and Education

Where do you keep your medicines? Are they in different places—with some in the medicine cabinet, some in the kitchen, and some in the bedroom or elsewhere? As a parent, grandparent, or family member, it’s important that you organize and keep track of your medicines.

After all, you will want to know where a particular medicine is when you or someone else needs to find it. And you will want to keep your medicines secure so that a child, or a toddler, or even a stranger, does not get into them. That way, you can help prevent an accidental injury, as well as do your part to stop the possible abuse of prescription medicines.

The first step in getting organized is to take a look at all the medicines you have. You should try to do this type of inventory every six months, or at least once a year.

Start by checking the expiration date on the bottle—you don’t want to take any chances with a medicine that no longer works the way it’s supposed to. Also, look for medicines that are discolored, dried out, crumbling, or show other signs that they are past their primes. Check the expiration date for eye drops and ear drops, too. They may no longer be effective and, worse, could be a breeding ground for bacteria or fungi.

In addition, look for leftover prescription medicines from a previous illness or condition. You want to discard these since you should never try to treat yourself or anyone else with a prescription medicine. Your symptoms might seem similar to what you had before, but the cause could be different, or the medicine may not be the right one this time around.

Proper Disposal of Prescription Medicines
Federal Guidelines encourage consumers to:
- Take unused, unneeded, or expired prescription drugs out of their original containers and throw them in the trash.
- Mix prescription drugs with an undesirable substance, such as used coffee grounds or kitty litter, and putting them in impermeable, non-descript containers, such as empty cans or sealable bags, will further ensure the drugs are not diverted.
- Flush prescription medications down the toilet only if the label or accompanying patient information specifically instructs doing so.
- Take advantage of community pharmaceutical take-back programs or community solid waste programs. Where these programs exist, they are a good way to dispose of unused pharmaceuticals.

Find a cool, dry area
Now that you’ve identified the medicines you want to keep, the next step is to find a safe place to keep them.

You’ll want to store your medicine in an area that is consistent, but is also cool and dry—since heat and humidity can damage medicines. That’s why a bathroom is not a good place to keep your medicines unless you are able to keep the room well ventilated. However, the bathroom medicine chest is an ideal place to keep items such as bandages, tweezers, gauze, cotton balls, scissors, and other products that aren’t affected by heat or humidity.

Lock up your medicines
If there are children around, you might want to find an area where you can lock up your medicines. A cabinet or a drawer with a lock on it would work.

It’s also an excellent idea to keep all controlled substances that have been prescribed for you. These include medicines such as lidocaine (Dilaudid®), oxycodone (OxyContin®), hydrocodone (Vicodin®), and alprazolam (Xanax®). *

The theft and abuse of prescription medicines is a serious problem. You play a big role in keeping these powerful medicines out of the hands of those who shouldn’t have them. Since it is dangerous, as well as illegal, for anyone but you to use a controlled substance prescribed for you, a locked storage area can help keep a stranger or someone else from gaining access to them.

Be smart…and safe
Here are some other suggestions that can help you be smarter about storing and using your medicines.

- Keep your medicines separate from those of your spouse or other family members. For instance, on a different shelf or at least on a separate side of a shelf. This will make it less likely that you take the wrong ones by mistake.
- Take advantage of community pharmaceutical take-back programs or community solid waste programs. Where these programs exist, they are a good way to dispose of unused pharmaceuticals.
- Never mix different medicines in the same bottle. You might end up taking the wrong one by mistake. It is also possible that some of one medicine could rub off on another and affect how well it works.
- Keep the caps on your pill bottles tightly closed. A cap can’t be childproof if it’s not fastened correctly.
- If there is cotton in the pill bottle when you first open it, remove the cotton and throw it away. The cotton can absorb moisture and affect the medicine that is inside.*

* Dilaudid is a registered trademark of Abbott Laboratories. OxyContin is a registered trademark of Purdue Pharma, L.P. Patterson is a registered trademark of Endo Pharmaceuticals. Vicodin is a registered trademark of Abbott Laboratories. Xanax is a registered trademark of Pfizer Inc.

For more information on what to do when you no longer need your medicines, visit the FDA page:
www.fda.gov/drugs/safe-disposal-medicines/disposal-unused-medicines-what-you-should-know
Emergency Preparedness

Protect Your Health: Important Disaster Preparedness Tips

Overview
Before a state of emergency, it’s crucial to create a disaster preparedness plan for your healthcare needs. It may be impossible to predict outcomes during a natural disaster, but the following tips can prevent many life-threatening situations before they occur.

Preparing for a Natural Disaster

- Pack all essential medications in a waterproof bag. A freezer safe, re-sealable bag is great in a pinch.
- If possible, fill prescriptions ahead of time. In a state of emergency, prescriptions can be filled up to 30 days without prior doctor approval.
- Make a prescription medicine plan. Use Rx on the Run to print a personalized wallet card that includes your prescriptions with the latest dosage and necessary instructions for proper use.
- Purchase non-perishable food, water, and nutrient-rich items. Apples, bananas and oranges are a great snack that don’t require refrigeration and will last up to a week.
- Fully charge your electronic devices and pack spare batteries, chargers, and other essential items. To conserve battery, limit the use of unnecessary apps and switch your phone to low-power mode when fully charged.
- Be aware of your closest healthcare resources, including pharmacies, hospitals, and urgent care clinics. Use Google maps to drop a pin on nearby healthcare locations.
- Have a contingency plan for managing chronic conditions. For patients with:
  - DIABETES: Ensure you have insulin and refrain from eating carbohydrates and other sugars.
  - KIDNEY DISEASE: Make sure you have access to dialysis treatment.
  - CARDIOVASCULAR/PULMONARY DISEASES: Keep a supply of oxygen with you at all times.
  - DISABILITY: Develop contingency transportation plans or identify a trusted caretaker if necessary.
  - ELDERLY: Post emergency numbers near every house and cellular phone.
- Make sure to have an evacuation plan in case you need to leave your home. To find a shelter near you, text FEMA the word “shelter” along with your zip code to 4-F-3-9-6-2.
- Use Rx Open (reopen.org) to find open pharmacies near you.

Healthcare Ready is here to help you stay prepared for a natural disaster, infectious disease outbreak or man-made event. Our online resources provide easy tips for what to do next when a disaster strikes and help make life after as normal as possible. For more information on how your rare or chronic illness can impact your evacuation strategy, visit www.healthcareready.org, email us at alerts@healthcareready.org, and contact us at 1-866-247-2694.

Healthcare Ready

866-247-2694 • HealthcareReady.org • @HC_Ready

Protect Your Health: Stay Safe and Healthy During Natural Disasters

During an emergency, unforeseen circumstances and events can put your health at risk. While it may be impossible to prevent all health complications, it’s critical to prioritize your health and minimize adverse effects. Remember that natural disasters can potentially disrupt operations for pharmacies, providers, and hospitals, so it’s crucial to prepare in advance to take care of your health.

Staying Healthy During a Natural Disaster

- Take necessary medications as prescribed. To help maintain regularly scheduled use of medicines, organize your prescriptions for the week and schedule a refill on your phone to take as prescribed.
- Make sure your medications remain stable. It’s important to make sure your medicines do not come into contact with water or become exposed to extreme temperatures. Some medicines must remain within a certain temperature range.
- Use Rx Open to locate nearest open pharmacy if you run out of medicines or need a refill. If you have a chronic disease, disability, or are a senior and need emergency assistance, refer to the emergency resources below:
  - FEMA: 1-800-358-9616
  - American Red Cross: 1-800-336-3500
  - American Diabetes Association: 1-800-342-2233
  - American Heart Association: 1-800-242-8772
  - American Association of People with Disabilities: 1-800-848-8144
- Drink plenty of bottled water and avoid skipping meals. Eat nutrient-rich, non-refrigerated foods such as fruits and vegetables.
- Beware of floodwater contaminants:
  - Do not drink floodwater; drink bottled water instead. If you don’t have bottled water, boil (for at least 1 minute) or disinfect water to make it safe.
  - Do not cook, clean or brush teeth with floodwater.
  - Cover open wounds and limit exposure to floodwater at all times.
- Do not eat foods that have expired, perforated or come in contact with flood water. Perishable foods in the refrigerator will be unsafe to eat after 4 hours without power. Use dry or block ice to keep your refrigerator cold for longer or use an extra cooler.
- Recognize symptoms of food or waterborne illness. If you experience vomiting, diarrhea, and abdominal pain, contact a healthcare provider immediately.

Healthcare Ready is here to help you stay prepared for a natural disaster, infectious disease outbreak or man-made event. Our online resources provide easy tips for what to do next when a disaster strikes and help make life after as normal as possible. For more information on how your rare or chronic illness can be impacted by a disaster visit www.healthcareready.org, email us at alerts@healthcareready.org, and contact us at 1-866-247-2694.
Adherence Tips

Why People Miss Their Doses

Reasons

5

It's normal to run into challenges with taking your HIV medicine. But, even missing one dose a month can make your medicine less effective. The good news is that there are ways to help you take every dose, every day. What's your challenge?

1

I Forget.
Pick something you do at the same time every day, like watching your favorite TV show or brushing your teeth, and take your medicine at that time every day. Set an alarm on your watch or phone. Download a smartphone app to set up reminders and track doses.

2

I Feel Sick From the Side Effects.
It's tempting to skip a dose when your medicine makes you feel bad. But, don't stop taking your medicine. Call your medical provider if you develop any side effects. Most side effects go away within a few weeks. Your provider can recommend ways to manage your side effects.

3

My Treatment Plan Is Too Complicated.
Fill a pill organizer at the start of the week with each dose of your medicine. Keep it where you can see it. Ask your medical provider to help you understand what medicine to take, when to take them, and how (for example, with or without food).

4

I Feel Overwhelmed Doing This Alone.
It's okay to ask for help. Your healthcare team is there to support you. Talk with them about the challenges you face so they can work with you to find solutions. Join a support group or reach out to family or friends you trust. Ask for help with tasks, like calling you for regular check-ins, going to the pharmacy to pick up your medicine, or just listening.

5

I Can't Afford to Pay for My Medicine.
There are public and private drug assistance programs that can help pay for your HIV medicine. Ask your HIV care manager or counselor to explain these programs and help you apply for assistance.

National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention
Division of HIV/AIDS Prevention

866-247-2694 • HealthcareReady.org • @HC_Ready
The Journey to Undetectable

The only way to know if you are undetectable is by visiting your provider regularly.

Best ways to keep an undetectable viral load and stay healthy:
- Take your medicine as prescribed.
- Visit your provider regularly.

To help you stay on your journey, it’s important that you find a provider who makes you feel comfortable and supported. This extends to the other health care professionals involved in your treatment.

Getting and keeping an undetectable viral load prevents HIV transmission during sex, but there are reasons why you and your partner may consider adding other prevention options like condoms and pre-exposure prophylaxis or PrEP.

- Difficulty keeping an undetectable viral load.
- Missed doses of medicine since last viral load test.
- Protection from other sexually transmitted diseases, like syphilis and gonorrhea.
- You or your partner want added peace of mind.

You can do this!
Wherever you are on the journey to undetectable, staying on treatment will improve your health no matter what challenges you may face along the way. Direct our to family and friends who support you on your journey.

cdc.gov/StopHIVTogether
#JourneyToUndetectable
#TalkUndetectable

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YOUR ROADMAP TO

You've been diagnosed with HIV. Where do you go from here? Follow our roadmap to help you live well with HIV.

Learn more at: cdc.gov/StopHIVTogether/treatment.

#HIVTreatmentWorks

GET IN CARE

- Once you receive a diagnosis of HIV, it's important to get connected to care.
- Find health care providers who make you feel comfortable and supported.
- They will help you stay informed about your HIV care and connect you to other services.

GET ON TREATMENT

- Getting on HIV treatment is the best thing you can do for your overall health and the first step toward getting an undetectable viral load.
- HIV medication must be taken every day to effectively treat the virus and prevent the spread of HIV.
VIVENT HEALTH PATIENT POLICIES

Vivent Health Patient Notice of Privacy Practices

THIS NOTICE DESCRIBES HOW HEALTHCARE INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Updated July 22, 2020

At Vivent Health we are grateful for the trust you place in us to provide you with health services. Our organization is required by law to maintain the privacy of your Protected Health Information (PHI) and to provide you with a notice that describes our organization’s legal duties and privacy practices and your privacy rights with respect to your health information. Vivent Health is committed to keeping your personal health information confidential and we will follow the privacy practices described in this notice. We believe that protecting your privacy is one of our most important responsibilities.

Because you have entrusted our organization to protect your privacy, we want to provide you with a complete explanation of how your personal health information may be used and to whom it may be disclosed. We will explain the use and disclosure of your health information when needed for your treatment, payment for health care or other health care operations, and when required or allowed by law. We will also explain your rights to access and control how your personal health information is used.

Personal health information is about you. It includes health information that identifies who you are and may include your contact information; your past, present or future health conditions; and the health services you receive including medical, dental, mental health, substance use disorder, pharmacy, and other health services. It is important that you carefully review the information we are providing you. If you have any questions or if you prefer that we not use or disclose your personal health information in the manner that we describe, please contact the Health Services Administrator in your state:

**WISCONSIN**
820 North Plankinton Avenue
Milwaukee, Wisconsin 53203
414-225-1639

**MISSOURI**
2653 Locust Street
St. Louis, Missouri 63103
855-751-8879

**COLORADO**
5250 Leetsdale Drive
Denver, Colorado 80246
303-393-8050

**TEXAS**
7215 Cameron Rd
Austin, Texas 78752
512-648-2273

Your personal health information & electronic health record

Each time you visit a hospital, medical clinic, physician, dentist, mental health therapist, pharmacy, substance use disorder counselor, or other provider, a record of your visit is made. Typically, this record
contains your symptoms, examinations and test results, diagnoses, and details on current or future care or treatment. This information, often referred to as your healthcare or medical record, serves as:

- Basis for planning your care and treatment
- Means of communication among the many health professionals who contribute to your care
- Legal document describing the care you received
- Means by which your third-party payer can verify that services billed were actually provided
- Tool in educating health professionals
- Source of information for public health officials charged with improving the health of the nation
- Source of data for facility planning and marketing
- Tool with which we can assess and continually work to improve care and health outcomes.

**Understanding what is in your record and how your health information is used helps you to:**

- Ensure accuracy
- Better understand who, what and why others may access your health information
- Make more informed decisions when authorizing disclosure to others

**All electronic health records**

Our organization is part of an organized health care arrangement, the Oregon Community Health Information Network (OCHIN) for electronic health record and other purposes. A current list of OCHIN participants is available at https://ochin.org/member-map. As a business associate of our organization, OCHIN supplies information technology and related services to us and other OCHIN participants utilizing Epic and other software. OCHIN also engages in quality assessment and improvement activities on behalf of its participants. For example, OCHIN coordinates clinical review activities on behalf of participating organizations to establish best practice standards and assess clinical benefits that may be derived from the use of electronic health record systems. OCHIN also helps participants work collaboratively to improve the management of internal and external patient referrals. Your personal health information may be shared with other OCHIN participants or a health information exchange only when necessary for medical treatment or for the health care operations purposes of the organized health care arrangement. Health care operations may also include geocoding your residence

**HEALTH INFORMATION EXCHANGES**

Our organization also participates in various Health Information Exchanges (HIEs) or similar arrangements for treatment, operations, and payment purposes. For example, we participate in the Wisconsin Statewide Health Information Network (WISHIN) for Wisconsin patients. In compliance with federal and state laws, we may make your Protected Health Information (PHI) available electronically through HIEs and similar arrangements to select health care providers that may request your information for purposes of treatment; and to public health entities as permitted by law. Our organization may access your PHI from other HIE participants for treatment and healthcare operations purposes. Our participation may be able to assist in avoiding medical errors during a health emergency.
For example, an emergency room physician with access to an HIE may access PHI from our organization for the purposes of providing emergency care.

Our organization also participates in immunization registries to enable your health care providers to locate needed information concerning your immunizations. For example, if you receive a vaccination for Hepatitis A at one of our clinics that information may be accessible to external health providers who also provide care for you.

**HOW WE MAY USE AND DISCLOSE YOUR PERSONAL HEALTH INFORMATION**

The following categories describe some of the different ways that we may use and disclose healthcare information without obtaining written authorization.

**For Treatment.** Our organization may use health information about you to provide, coordinate and manage your treatment or services internally and externally. We may disclose healthcare information about you to other doctors, pharmacists, nurses, behavioral health providers, lab technicians, case managers, patient services representatives, legal staff, medical, dental, nursing, pharmacy students, or others as needed who are involved in your care and services. For example, a laboratory or medical specialist may need to know information about you to run tests or to provide treatment, or a patient services representative or other staff may need to access your record to set-up and coordinate your appointments.

We may also provide subsequent healthcare providers with copies of various reports that may assist them in treating you. For example, your healthcare information may be provided to a physician to whom you have been referred so that the physician has important information regarding your previous treatment, diagnoses, or medications.

**For payment.** We may use and disclose healthcare information about your treatment and services to bill and collect payment from you, your insurance company, or a third-party payer such as Medicaid or Medicare. For example, we may need to give your insurance company information before it approves or pays for the health care services we recommend for you. The insurance company may use that information to make a determination of eligibility or when undertaking review activities. For example, obtaining approval for a medical procedure may require that your health information be disclosed to the health plan to obtain approval for the hospital admission.

**For Health Care Operations.** We may use or disclose, as needed, your health information in order to support our business activities. These activities may include, but are not limited to, quality assessment and improvement, financial audits, employee performance reviews, scheduling, student training, licensing and accreditation, marketing, legal advice, accounting support, healthcare records storage, transcription, complaint resolution, and other agency operations. For example, we may provide your contact information to a third-party patient evaluation organization to conduct a survey to assist us in care improvement.

**Research.** Under certain circumstances, we may use and disclose health information about you for research purposes. For example, a research project may involve comparing the health and recovery of all individuals who receive one medication to those who receive another. All research projects, however, are subject to a special approval process to ensure adherence to privacy rules and those who receive
this information are obligated to maintain its confidentiality under federal and state laws. Lastly, if certain criteria are met, we may disclose your health information to researchers after your death when it is necessary for research purposes.

USES AND DISCLOSURES MADE WITH YOUR CONSENT OR OPPORTUNITY TO OBJECT

Individuals Involved in Your Care or Payment for Your Care. If you do not object and the situation is not an emergency, and disclosure is not otherwise prohibited by law, privacy laws permit us to use professional judgment to disclose information to family members, relatives, close friends, or others involved in your care or helping you pay your medical bills.

Communications. We will communicate to you via all means including mailings, through electronic communications such as telephone, text, voicemail or email, or any other means regarding, but not limited to: treatment options, appointment reminders, prescriptions and medicines, information on health-related benefits or services, disease-management programs, policy changes or announcements, wellness programs; to assess your satisfaction; to remind you of appointments; as part of fund raising efforts; for population-based activities relating to training programs or reviewing competence of health care professionals; or other community based initiatives or activities in which we are participating.

If you are not interested in receiving certain communications or materials, please contact your local Health Services Administrator. Vivent Health will review all reasonable requests. However, for billing we must have an address to send bills to you. If you would prefer your bills to be mailed to an alternative address please contact your local Health Services Administrator.

USES AND DISCLOSURES MADE WITHOUT YOUR AUTHORIZATION OR OPPORTUNITY TO OBJECT

The following categories describe the ways our organization may use and disclose your health information without your authorization and without providing you an opportunity to object:

• When required by law, including law enforcement, court order, judicial or administrative proceedings, or other requirements
• Public health authorities, including local, state or federal agencies as required
• Health care oversight agencies authorized for audits, investigations or other proceedings
• For judicial and administrative proceedings
• Law enforcement authorities
• Government authorities involving victims of abuse, neglect or violence
• Coroners, medical examiners and funeral directors
• Organ, eye or tissue donation services
• Workers compensation agents
• Specialized government functions, such as national security, military and public safety authorities
• Averting health and safety threats to a person or the general public
• Disaster relief efforts
• Other areas as provided by law

WHEN WE MAY NOT USE OR DISCLOSE YOUR HEALTH INFORMATION

Except as provided in this Notice of Privacy Practices or as required or allowable by law, our organization will not use or disclose your health information without written authorization from you. If you do
authorize our organization to use or disclose your health information for another purpose, you may revoke your authorization in writing at any time. If you revoke your authorization, we will no longer be able to use or disclose health information about you for the reasons covered by your written authorization, though we will be unable to recover or take back any disclosures we have already made.

YOUR HEALTH INFORMATION RIGHTS

You Have the Right to Request Restrictions on Certain Uses and Disclosures. You have the right to request a restriction or limitation on the healthcare information we use or disclose about you for treatment, payment or health care operations. You also have the right to request a limit on the healthcare information we disclose about you to someone who is involved in your care or the payment for your care, like a family member or friend. For example, you could ask that we not use or disclose information about a procedure that you had. We ask that you submit these requests in writing to your local Health Services Administrator. Our organization is not required to agree in all circumstances to requested use or disclosure restrictions unless required by law. If we do agree, we will comply with your reasonable request except in certain situations such as emergency treatment, health and safety concerns, seeking payment, or other practicalities.

You Have the Right to Request Confidential Communication. You have the right to make reasonable requests that we communicate with you about healthcare matters in a certain way or at a certain location. We will agree to the request to the extent that it is reasonable for us to do so. For example, you may ask that we use an alternative address for billing purposes or that we communicate with you through unencrypted email. We ask that you submit these requests in writing to our Health Services Administrator.

You Have the Right to Inspect and Copy Your Health Information. You have the right to inspect and receive a copy of your healthcare information. We ask that you submit these requests in writing. Usually, this includes medical and billing records, but does not include psychotherapy notes or information compiled in reasonable anticipation of, or for use, a civil, criminal, or administrative action or proceeding. Reasonable requests for access to and copies of your healthcare information must be submitted in writing to our Health Services Administrator. We may charge a reasonable fee to cover the costs of copying these records.

You have the Right to Request an Amendment to Your HealthCare Information. If you feel that healthcare information we have about you is incorrect or incomplete, you may ask us to amend the information by submitting a request and reason(s) in writing to our Health Services Administrator. You have the right to request an amendment for as long as we keep the information. We may deny your request for an amendment and if this occurs, you will be notified of the reason for the denial.

You Have the Right to an Accounting of Disclosures. You have the right to make a reasonable request for a list of certain disclosures that we have made of your health information. To request this list of disclosures, you must submit your request in writing to your local Health Services Administrator. Your request must state a time period, which may not be longer than six years from the date of the request. Your request should indicate in what form you want the list (for example, on paper, electronically). The first list you request within a twelve-month period will be free. For additional lists during the same
twelve-month period, we may charge you for the costs of providing the list. We will notify you of the cost involved and you may choose to withdraw or modify your request at that time before any costs are incurred. We must comply with your reasonable request for a list within 60 days, unless you agree to a 30-day extension. You Have the Right to be Notified of a Breach. We are required by law to notify you following a breach of unsecured protected health information within the parameters of HIPAA or other relevant privacy laws.

**You Have the Right to a Paper Copy of this Notice of Privacy Practices.** You have the right to a paper copy of this notice, which is also available at [http://www.ViventHealth.org/privacy-notice](http://www.ViventHealth.org/privacy-notice). You may ask us to give you a copy of this notice at any time. To exercise any of your rights, please obtain the required form from our Health Services Administrator and submit your request in writing.

**CHANGES TO THIS NOTICE**

Vivent Health reserves the right to change this Notice of Privacy Practices. We reserve the right to make the revised Notice effective for health information we already have about you as well as any information we receive in the future. Any updated Notice will be available upon request, in our office, and on our website. The Notice will contain the effective date on the first page. In addition, if we make material changes to the Notice, we will offer you a copy of the current Notice in effect.

**COMPLAINTS**

If you believe your privacy rights have been violated, you may file a written complaint with the Vivent Health Privacy Officer. All complaints must be submitted in writing. You will not be penalized for filing a complaint. You may also file a complaint with the Federal Department of Health and Human Services.

**Vivent Health Privacy Officer**
648 N. Plankinton Ave
Milwaukee, WI 53203

**U.S. Department of Health and Human Services**
Office of Civil Rights, Region V
233 N. Michigan Ave, Suite 240
Chicago, IL 60601
1-866-627-7748

**AVAILABILITY OF THIS NOTICE**

Our organization provides this Notice of Privacy Practices to all patients. This Explanation is posted in all organization patient care locations and on the agency website at [http://www.ViventHealth.org/privacy-notice](http://www.ViventHealth.org/privacy-notice).
Patient Rights and Responsibilities

Updated DEC 2018

(To be translated or read aloud to client/patient if they are unable to read or understand this document)

Service Rights: Each patient/client receiving services from Vivent Health has the following rights:

• To be fully informed, as evidenced by the patient’s/client’s written acknowledgment at the time of enrollment and during the course of services, of these rights and responsibilities;
• To be fully informed, at the time of admission and during the course of service, of the services and financial benefits available at this agency;
• To voice opinions, concerns, or complaints, and recommend changes in policies and services, through appropriate staff;
• To file a grievance which will be responded to according to Vivent Health Grievance Procedures.
• To access eligible services regardless of ability to pay or past health condition.

Service and Treatment: Each patient/client enrolled in or receiving relevant Vivent Health services has the following rights:

• To be fully informed of available psychosocial and medical interventions; given the opportunity to participate in the planning of interventions; and may refuse interventions recommended by staff;
• To choose a licensed, certified, or registered health care provider as feasible;
• To receive adequate and appropriate professional service within the capacity of the agency and be informed of any limitations of Vivent Health services;
• To participate in the development and periodic revision of treatment and service plans.
• To confidential protection of records and to refuse their release to any individual or entity outside the agency, except as required or allowed by law;
• To choose preferred and reasonable methods of communication with Vivent Health staff, when reasonable;
• To be free from discrimination based on age, arrest/conviction record, national origin, ethnicity, race, sex, color, gender identity, ancestry, disability, marital status, pregnancy, religion, sexual orientation, or other protected category;
• To be informed of the identity and role of staff responsible for service or care, and the identity and role and status of others involved in interventions;
• To obtain reasonable access to their own health information and request amendment to it, as permitted under applicable law;
• To designate a person(s) who will participate in discussions with providers for medical care, dental care, housing assistance, legal assistance, testing, and case management. Participation in care decisions by persons other than a patient receiving mental health care will be determined by the mental health care provider, as appropriate;
• Upon request, to be informed both orally in writing, in advance of the care being provided, of the charges, including payment for care/service expected from third parties, when possible, and any estimated charges for which the client/patient may be responsible.
• To receive services in a safe, secure, confidential, respectful and accessible environment.
• To receive meaningful access to services and treatment, regardless of limited English proficiency, including oral interpretation and translated vital documents in a language or format understandable to the client/patient.
• To receive accessible and reasonable services and treatment regardless of disability.
• To dis-enroll or opt out of any service or program, including the HIV Medical Home.

**Patient/Client Responsibilities:** Each patient/client receiving services has the following responsibilities:

• To follow the service plan recommended by staff and agreed to by the patient/client. This may include following instructions of affiliated health professionals;
• To inform the service provider immediately if instructions are not understood, or if they cannot be completed;
• To ask about possible results or outcomes, should interventions or instructions not be followed;
• To supply accurate and complete information about conditions, concerns, complaints, and difficulties relating to needs;
• To provide Vivent Health staff with information and documentation to assist with program eligibility, such as proof of income, residency and insurance.
• To notify the program staff of any change in status (including address, phone, finances, benefits, health, service needs);
• To notify the program staff of any desire to dis-enroll or opt out from any service or program.
• To follow agency rules and regulations, and to be considerate of the rights, privacy, and property of other patients/clients and of agency staff and volunteers.
Patient Grievance Policy and Procedure

Updated November 2018

PURPOSE

The purpose of the Vivent Health Patient Grievance Procedure is to work to resolve grievances related to Vivent Health service delivery. Vivent Health will respond to a grievance in a timely and effective manner to assure that conflicts are resolved and consumer service needs are met.

POLICY

Consumers have the right to file a grievance related to any Vivent Health program or service. The grievance procedure will assist those who have complaints related to accessing or receiving any Vivent Health services.

In filing a grievance, patients/clients are assured that:

- there will be no repercussions from Vivent Health staff, volunteers, or other service users;
- services will continue to be provided to them without interruption or discrimination;
- the grievance procedure is confidential;
- there is no cost to consumers to file a grievance.

Vivent Health will assist the patient/client through the steps of the grievance procedure. A person filing a grievance may be represented by a parent or a legal guardian.

Grievances should be filed within 90 days of the incident or from the time the patient/client learned of the incident. The time limit can be extended for good cause including incarceration, poor health, hospitalization, or other items.

All grievances and steps to resolve them will be documented in the Vivent Health Grievance Log maintained by the state VP of Operations (Health and Social Services) or Director of Pharmacy Services (Pharmacy). Any Vivent Health staff member receiving a completed, signed grievance - either one filled out by the patient/client or an oral grievance written down by a staff person and then signed by the complainant - will forward this information to the VP of Operations or Director of Pharmacy Services within 24 hours.

The Vivent Health grievance procedure is intended to address issues of merit in a confidential manner. Vivent Health reserves the right to reject frivolous or unmeritorious grievances and to reject grievances that are not held in confidence by the consumer, parent, or legal guardian. The decision to reject grievances due to lack of merit or frivolity will be made by the Program Director. All rejected grievances will be filed, with an explanation for the rejection, in the Grievance Log.

PROCEDURE
Patients/Clients can file their complaint with Vivent Health staff in writing or verbally. If a grievance is filed verbally, Vivent Health staff will put the basis and major points of the complaint in writing and the complainant will then sign the grievance prior to Vivent Health proceeding with it.

**Step 1**: The patient/client will complete the Vivent Health Grievance Report Form and present it for discussion to the primary service delivery staff person. Through discussion, resolution of issues will be pursued. If the grievance cannot be resolved through discussion, or if the grievance directly involves the service delivery staff person, proceed to step 2.

**Step 2**: The patient/client will complete and present the Vivent Health Grievance Report Form to the appropriate supervisory staff. The appropriate supervisor will contact the complainant within 5 working days of receipt of the grievance to investigate and discuss the issue of the grievance and attempt resolution. The appropriate supervisor will then respond in writing to the complainant, within 5 working days of the discussion with the complainant, with a strategy to resolve the grievance.

**Step 3**: The patient/client will complete and present the Vivent Health Grievance Report Form to the appropriate Program Director. The Program Director will contact the complainant within 5 working days of receipt of the grievance to investigate and discuss the issue of the grievance and attempt resolution. The Program Director will then respond in writing to the complainant, within 5 working days of the discussion with the complainant, with a strategy to resolve the grievance.

**Step 4**: If the patient/client is dissatisfied with the response from the Program Director, or if the complaint specifically involves the Program Director, the complainant will direct the Vivent Health Grievance Report Form to the Chief Operating Officer or Chief Pharmacy Officer. The Chief Operating Officer or Chief Pharmacy Officer will investigate and address the issue and contact the complainant within 10 working days of receiving the grievance. If a mutual satisfactory resolution is not achieved within this grievance process, Vivent Health will consult with the State AIDS/HIV Program for final disposition of the grievance.