

Richmond Apothecaries, Inc NOTICE OF PRIVACY PRACTICES

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

We at Richmond Apothecaries recognize that the foundation of our business depends on assuring your trust and confidence. We are committed to protecting the privacy of your protected health information (PHI) that is in our possession, and only using and sharing your PHI as necessary to provide you with healthcare products and services. PHI is any information that we possess, use, and share that identifies you and relates to your past, current, or future physical and mental health condition or illness and the healthcare products and services that have been provided to you. This "Notice of Privacy Practices" (Notice) has been created to 1) help you understand our legal duties to protect your PHI and 2) explain how we may use and share your PHI. This Notice describes the legal rights that you have related to your PHI that that we possess. We will use and share your PHI as necessary to provide treatment to you, obtain payment for healthcare products and services provided to you, and other healthcare operations and activities as described later in this Notice. Should a need to use or share your PHI occur, that is not described in this Notice, we will obtain your written authorization beforehand. At some future time, it may be necessary for us to revise this Notice. If this becomes necessary, we will post the revised Notice in the pharmacy, and if you request, provide a written Notice to you.

This Notice applies to Richmond Apothecaries, Inc, which also includes the following companies:

Bremo-Westhampton Pharmacy
2024 Staples Mill Rd
(804) 288-8361

Bremo LTC Pharmacy
2002 Staples Mill Rd
(804) 285-7823

Henrico Pharmacy
7806 Forest Ave
(804) 285-7730

If you have questions about any of your rights as described in this Notice, please contact our Privacy Officer:

Privacy Officer: Catherine H Cary, PharmD
Richmond Apothecaries
2002 Staples Mill RD
(804) 285-8055 extension 127
CHCary@RAIRX.com

I. Your Rights With Respect To Your PHI

Federal law entitles you to several rights related to your PHI. These rights are summarized below. If you would like more information about any of these, please contact our Pharmacy Privacy Officer.

1. You have the right to receive this written Notice of Privacy Practices describing how we will protect your PHI and your rights related to PHI. You are entitled to request this written Notice at any time.
2. You have the right to request a restriction on how we use and share your PHI. Please be aware that we may not be able to honor your requested limitation if it unduly limits our ability to provide healthcare products and services to you, if it creates an excessive financial burden, or if we are required to use and share the PHI under federal or state law. All requests for limitation on the use and disclosure of your PHI must be submitted to our Privacy Officer in writing using a privacy request form.
3. You have the right to review or receive copies of our records that contain your PHI, to the extent that these records are part of a designated record set as defined by privacy laws. The most common such records are your prescriptions on file, our patient profile for you, and our billing records for healthcare products and services that have been provided to you. You may review such records at no charge during normal business hours. However, we may charge you a reasonable, cost-based fee for copies of the records, together with any expenses for mailing, special courier, faxing, and supplies necessary to fulfilling your request for records. If we are unable to provide our records to you, we will provide you with a written explanation of why we are not able to provide the records. Depending on the reason, you may submit a written request for us to reconsider. All requests to review or receive copies of our records that contain your PHI must be submitted to our Privacy Officer in writing using a form that we will provide to you.
4. You have the right to request changes in the content of your PHI contained in our records where you believe the content is in-complete, inaccurate, or for some other reason needs to be changed. We may not be able to honor your requested change if we no longer have the records or if the requested change would cause your PHI to become inaccurate. If we are not able to agree to your requested change, we will notify you in writing as to why we are not able to agree. You will then have the right to submit to us a written statement of disagreement. We may then elect to further respond in writing to you. All requests for changes to your PHI in our records must be submitted to our Pharmacy Privacy Officer in writing.

5. You have the right to request that we communicate with you about your PHI in a confidential manner and only to locations (such as at a different residence) or by means (such as personal cellular telephone) specified by you. All requests for confidential communications must be submitted to our Pharmacy Privacy Officer in writing, using a privacy request form.
6. You have the right to obtain an accounting of some of our disclosures of your PHI made after April 14, 2003. By an accounting, we mean a written record of these disclosures. Some of our disclosures of your PHI are not required by privacy laws to be included in the accounting. Most notable among these are routine disclosures for purposes of treatment, obtaining payment, and carrying out healthcare operations. Other disclosures of your PHI that are not required to be included in the accounting are disclosures made directly to you or that you have authorized, made to family, friends, and others who assist you with your care (caregivers) and made for other purposes allowed by privacy laws. Please consult with our Privacy Officer for more information on the disclosures not required to be included in the accounting. The period of time for which we are required to provide the accounting is the six-year period immediately prior to the date of your request for the accounting but no earlier than April 14, 2003; however, your request for an accounting can be for a shorter period of time. You may obtain from us, without charge, one accounting during a 12-month period. However, if you request additional accountings during the same 12-month period, we may charge you a reasonable, cost-based fee for printing or copying the accounting, together with any expenses for mailing, special courier, faxing, and supplies necessary to fulfill your request for the accounting. If it becomes necessary for us to charge you for an accounting, we will notify you in advance and allow you to withdraw or modify your request for the accounting. All requests for an accounting of our disclosures of your PHI must be submitted to our Pharmacy Privacy Officer in writing, using a form that we will provide to you.
7. You have the right to file a complaint if you believe that we have violated your rights as described above, and to not fear retaliation or adverse action by us against you for exercising your right. You can file the complaint with us directly, or with the United States Department of Health and Human Services (HHS). Please be assured that we will work with you to resolve any complaint, including providing you with the address for filing a complaint with HHS.

II. Ways That We May Use and Share Your PHI

Federal Law requires that this Notice tell you how we may use and share your PHI. These uses and disclosures are summarized below, but if you would like more information about any of these please contact our Pharmacy Privacy Officer at the address or telephone number found at the beginning of this notice.

1. **Treatment.** We will maintain records that contain your PHI, and we will use and share your PHI as necessary to provide healthcare products and services to carry out and support your treatment. As a pharmacy, we may use and share your PHI as necessary to maintain a patient profile on you, which may include information about you; your medical condition, medications, and prescription devices that you use; any allergies that you may have; and other information, such as any health insurance that you may have. We may use and share your PHI in filling prescriptions and related products and services, including counseling you and your caregivers about proper use of your medications. We may discuss such issues with your other healthcare professionals, such as your physician or dentist, and through such discussions we may use and share your PHI.
2. **Payment.** Payment activities include billing you directly or someone who pays for your healthcare, such as a family member or health insurance company, for healthcare products and services that we provide to you. Activities related to billing may include claims management, collections, and related healthcare data processing. Depending on who pays for the healthcare products and services that we provide you, other activities may include determination of eligibility or coverage; medical necessity; review of healthcare services with respect to medical necessity, coverage under a health plan, appropriateness of care, or justification of charges; utilization review activities, including pre-certification and preauthorization of services; concurrent and retrospective review of services; and disclosure to consumer reporting agencies of some or all of the following PHI necessary for collection of payment: name and address; date of birth; social security number; payment history; account number or numbers; and name and address of the healthcare provider and/or health plan. If you utilize an in store charge account for payment of services, then PHI related to payment, including a brief description of products and services purchased will be disclosed to the individual responsible for paying the bill. We will use and share your PHI to carry out the above activities as necessary or required to obtain payment for the healthcare products and services that we provide to you. In relation to this, public and private healthcare insurance programs that may provide or pay for your healthcare can conduct audits, inspections, and investigations of us in relation to our activities and your activities. We may be required to share your PHI to these programs for purposes of audits, inspections, and investigations.

3. **Healthcare Operations.** Healthcare operations include those activities necessary and related to our providing of healthcare products and services to you. These activities include, but may not be limited to, the following.
 - A. Conducting quality assessment and improvement activities, case management and care coordination, and contacting healthcare providers and patients with information about treatment alternatives and related functions that do not include treatment.
 - B. Conducting or arranging for medical review, legal services, and auditing functions, such as fraud and abuse detection and compliance programs.
 - C. Pharmacy management and general administrative activities, including, but not limited to, activities relating to implementation of and compliance with the privacy laws.

We will use and share your PHI in order to carry out the above activities as necessary or required, and especially to monitor and improve the quality of the healthcare products and services that are provided to you by us and other healthcare professionals.

Health Related Communications with You. We want to assist you with maintaining your health and obtaining the most benefit from your treatment. We routinely monitor your prescription medications for appropriateness and take other steps to help you use your medication properly. We may contact you to provide refill reminders or information about treatment alternatives or other health-related benefits and services that may be of interest to you. As a final example, in the event of a medication recall, we may contact you, if you are taking the medication subject to the recall.

Caregivers or Family Members. We may communicate with you directly, as well as others who assist you with your healthcare, commonly referred to as caregivers. When you are not available, we may share your PHI with your caregivers or family members who are involved in your care, or payment for your care. For example, we may use our professional judgment to determine if your spouse is involved in your care, and share and counsel your spouse about proper use of your prescription, when you are not available. If you choose, you may restrict access to your PHI from your spouse or others, by completing a privacy request form. We reserve the right to deny such a restriction, as outlined in the first section of this Notice.

Virginia law defines persons under the age of eighteen as “minors.” In the case of a minor, our pharmacy staff members will share PHI with the parent or guardian. By law minors have the right to choose to be treated for venereal disease or any infectious/contagious disease, birth control, family planning, pregnancy care, and outpatient mental health services, without consent from their parent or guardian. In such cases, Richmond Apothecaries will honor a minor’s request to restrict access to their PHI from their parent or guardian, but the minor must request such a restriction, in writing, using the privacy request form.

In addition to treatment, payment, and healthcare operations as described above, we may use and share your PHI for the following purposes listed in 4–13.

4. **Business Associates.** The nature of the healthcare system is such that we may not be able to provide healthcare products and services to you without the involvement of other businesses or persons. In some situations, we may need to allow a business associate to have access to your PHI, in order for them to carry out a job we have asked them to do. Examples of such business associates include: our computer software maintenance vendor, a health insurance company, or a company that pays claims for a health insurance company. Contracts have or will be submitted to all of our business associates to whom we allow access to your PHI. Very importantly to you, these contracts require our business associates to give us their assurance that they, like us, will safeguard your PHI.
5. **Federal and State Government Agencies.** We may share your PHI with federal and state government agencies for a variety of purposes, most of which are directed at monitoring healthcare quality and safety, and government programs related to healthcare and our compliance with laws applicable to healthcare. For example, the DEA monitors the distribution and usage of controlled substances, while the FDA monitors adverse drug events. We may share your PHI with such agencies as required. Similarly, manufacturers of medications and medical devices, are legally required to conduct post-marketing surveillance in order to ensure the safety of their products. Disclosing your PHI for such surveillance may be necessary.
6. **Workers Compensation.** If you are employed by a business that is required to carry workers’ compensation insurance, and you are injured in such a way that the workers’ compensation plan covers your healthcare, it may be necessary to share your PHI with the workers’ compensation plan. Such plans have a right to conduct audits, inspections, and investigations of our activities and your activities, and where required, we will share your PHI for these activities.

7. **Matters of public health and safety.** There are a number of federal and state laws that require healthcare providers to report to various government agencies matters related to public health. If your physical or mental health condition and illness is of a nature that federal or state law requires that it be reported, then we will share your PHI with the appropriate government agency. In addition, we may also share your PHI with government agencies in other situations where we are required to submit reports, such as suspected domestic, child or elder abuse, or neglect.
8. **Law enforcement activities.** Federal, state, and local government agencies are charged with enforcing the healthcare and drug laws, and other laws in relation to the healthcare products and services. In addition, as a state licensed pharmacy, a variety of federal, state, and local healthcare agencies regulate our activities. These agencies, such as the state board of pharmacy, may conduct inspections and investigations of our activities and the healthcare products and services that we provide to our patients. Whenever we are required by federal or state laws, or by court order, subpoena or other legal mandate, to share your PHI, we will do so as necessary.
9. **Legal disputes.** Lawsuits and other legal disputes may involve your PHI that we possess. In the event that you are involved in a lawsuit or other legal proceeding, whether as a plaintiff or a defendant, and without regard to the basis for the lawsuit, such as medical malpractice or divorce, we will share your PHI when required to comply with a court order, subpoena, discovery proceeding, such as a deposition, or other legal mandate served upon us. This policy in no way restricts you from requesting access to your own PHI, for these, or any other purposes.
10. **Disclosures for the Benefit of You and Others.** A variety of events could occur where we would use and share your PHI for your benefit and to prevent or reduce the risk of harm to you. For example, if you are in a car accident and are unconscious in a hospital emergency room and the emergency room medical staff calls us with a request for your PHI, we may share it for the purpose of assisting in your prompt medical treatment. Finally, we may share your PHI where necessary to protect the health and safety of others.
11. **Disclosures for National Security and Intelligence.** We are legally required to share your PHI when necessary with national security activities and intelligence and counterintelligence activities. Disclosures related to this may also include those required in relation to the protection of the President of the United States. Any disclosure for these purposes would be made only to authorized government officials.
12. **Disclosures if you are in the Military or a Veteran.** We may share your PHI, if you are a member of any branch of the armed services, whether on active or reserve status as required by the U.S. Military. If you are a veteran, we may release your PHI, particularly if you are receiving healthcare products and services from the Veterans Services. Any disclosure for these purposes would be made only to authorized government officials.
13. **Miscellaneous.** This last category includes a variety of disclosures that we may make in accordance with privacy laws. We may be required to share your PHI if you are placed into the custody of a federal or state correctional system, if necessary to protect the health and safety of you and others. Healthcare is an area where much research is being conducted, and we may share your PHI for purposes of a research project. Finally, given the national need for organ donations, we may share your PHI with organizations that manage organ transplantation programs.

III. Uses and Disclosures Not Contained in this Notice

If a use and disclosure of your PHI is not contained in this Notice, then we will obtain your written authorization beforehand. You may have the right to refuse to authorize the use and disclosure, or if you grant the authorization, to revoke the authorization at any time. If such authorization is requested, we will provide you with a form that describes the proposed use and disclosure and your rights related to the requested authorization.

IV. Conclusion

Federal law requires that we give you this "Notice of Privacy Practices" and make a good faith effort to obtain your written acknowledgement that you were given this Notice. Upon giving you this Notice, you will be asked to sign a document acknowledging that you received this Notice. We appreciate your cooperation in reviewing this Notice and in giving us your written acknowledgement.

Please consult our Privacy Officer if you have any questions or want more information concerning your healthcare and privacy rights. Also, you should consult our Privacy Officer if you wish to file a complaint about our privacy practices or if you believe we have violated any of your rights as described in this Notice. Thank you for allowing us the privilege of serving your healthcare needs. We look forward to continuing to be of service to you.

Effective Date: 04/14/2003