

Herndon Healthcare, Inc.

Our Patient Confidentiality Statement

Herndon Pharmacy protects the confidentiality of your health information as required by law and our internal policies and procedures. This notice explains your rights, our legal duties and our privacy practices. We are required to follow the terms of this Notice and provide individuals with such a notice of our legal duties and privacy practices. We reserve the right to change our practices and this Notice and to make the new Notice effective for all information we maintain. Upon request, we will provide any revised Notice to you.

Your Health Information Rights

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.

For Prescription Health Care: *We will use and disclose information about you for treatment.*

Information obtained by the pharmacist will be used to dispense prescription medications to you. We will document in your record, information related to the medications dispensed to you and services provided to you. 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.

We will use and disclose information about you for payment. We will contact your insurer or pharmacy benefit manager to determine whether it will pay for your prescriptions and the amount of your co-payment. We will bill you or a third party payor for the cost of prescription medications dispensed to you. The billing may include information that identifies you, as well as the prescriptions you are taking.

Business associates: There are some services provided by us through contracts with business associates such as Pacific Pharmacy Computers, who we provide limited information, so they can perform electronic claims processing. To protect the information about you, we require the business associate to appropriately safeguard the information.

Food and Drug Administration (FDA): We may disclose to the FDA, information relative to adverse events with respect to drugs, foods, supplements, products and product defects, or post marketing surveillance information to enable product recalls, repairs or replacement.

Fundraising: We may contact you regarding certain special event notifications.

Correctional institution: If you become incarcerated, we may disclose information to the institution or it's agents when necessary for your health or the health and safety of others.

As Permitted or Required by Law: Information about you may be used or disclosed to regulatory agencies, such as during audits, investigations and inspections, as necessary for licensure or other proceedings; for administrative or judicial proceedings; to public health authorities; or to law enforcement officials, such as to comply with a court order or subpoena, and to report victims of abuse, neglect or domestic violence.

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Authorization: Other uses and disclosures of protected health information will be made only with your written permission, unless otherwise permitted or required by law. You may revoke this authorization, at any time, in writing. We will then stop using your information for that purpose. However, if we have already used your information based on your authorization, you cannot take back your agreement for those past situations.

Your Rights

Under regulations that are in effect as of April 2003, you will have additional rights over your health information. Under the new rules, you will have the right to:

- Request a restriction on certain uses and disclosures of information. We are not required to agree to those restrictions.
- Send us a written request to see or get a copy of information that Herndon Pharmacy has about you, for as long as we maintain the information. The patient records usually will include prescription and billing records. We may deny your request in certain limited circumstances. If you are denied access to your information, you may request that the denial be reviewed.
- Request an amendment of information that we maintain, that you feel is incomplete or inaccurate. You may request an amendment for as long as we maintain the information. In certain cases, we may deny your request for amendment. If we deny your request, you have the right to file a statement of disagreement with the decision and we may give a rebuttal to your statement. If we did not create the information, we will refer you to the source, such as your physician or treatment center.
- Receive an accounting of our disclosures of your information. You have the right to receive an accounting of the disclosures we have made about you after April 14, 2003, for most purposes other than treatment, payment, or health care operations. The accounting will exclude certain disclosures, such as disclosures made directly to you, disclosures to authorize, disclosures to friends or family members involved in your care and disclosures for notification purposes. The right to receive an accounting is subject to certain other exceptions, restrictions and limitations. In your request, please specify the time period, but it may not be longer than six years. The first accounting you request within a 12 month period will be free of charge. You may be charged for the cost of providing additional accountings. We will notify you of any cost involved and you may choose to withdraw or modify your request at that time.

For More Information or to Report a Problem

If you have questions, would like any of the information referenced above or any other information about Herndon Pharmacy's privacy practices, you may contact Linda Tayian Hurst, Pharm.D. If you believe your privacy rights have been violated, you can file a complaint with Linda Tayian Hurst, Pharm. D. Please be assured, there will be no retaliation for filing a complaint.

Effective Date

This notice is effective as of April 14, 2003.