

STATE LAWS MORE STRINGENT THAN HIPAA

WASHINGTON- Unless authorized by you, we will not disclose your health information, except if the recipient needs to know the information and the disclosure is: (a) to a person who the pharmacist reasonably believes is providing healthcare to you. (b) To any other person who requires health care information for healthcare education, or to provide planning, quality assurance, peer review, or administrative, legal, financial, or actuarial service to the pharmacy; or for assisting the pharmacy in the delivery of health care information and the pharmacist reasonably believes that the person will not use or disclose the health care information for any other purpose and will take appropriate steps to protect the health care information; (c) To any other health care provider reasonably believed to have previously provided health care to you, to the extent necessary to provide health care to you, unless you have instructed the pharmacy in writing not to make the disclosure; (d) To any person if the pharmacist reasonably believes that disclosure will avoid or minimize an imminent danger to your or another individual's health or safety, however there is no obligation on the part of the pharmacist to so disclose; (e) oral, and made to your immediate family members, or any other individual with whom you have a close personal relationship, if made in accordance with good medical or other professional practice, unless you have instructed us in writing not to make the disclosure; (f) to health care provider who is the successor in interest to the pharmacy; (g) to a person who obtains information of an audit, if that person agrees in writing to remove or destroy, at the earliest opportunity consistent with the purpose of an audit, information that would enable you to be identified and not disclose the information further, except to accomplish the audit or report unlawful or improper conduct involving fraud in payment for health care provider or patient, or other unlawful conduct by the pharmacy; (h) To an official of a penal or other custodial institution in which you are detained; or (i) To provide directory information, unless you have instructed the pharmacy not to make the disclosure.

Minor's Right to Consent to Treatment

If you are a minor who has lawfully provided consent for treatment and you wish Ready Meds Pharmacy to treat you as an adult for purposes of access to and disclosure of records related to such treatment, please notify the Pharmacist. **A minor becomes an adult under the law at the age of 18, or if married a person who is at least eighteen.**

Unemancipated Minor is a minor who is living under the care of his or her parent(s) or guardian. Under Washington State Laws, unemancipated minor can give **effective consent** for treatment. **Effective Consent** means that the minor's consent is sufficient to allow a health care provider to treat patients and the parents' or guardian's consent is not required. Effective consent by an unemancipated minor can only be given to the following treatments are: (a) Sexually transmitted disease (if minor is 14 years of age or older); (b) HIV testing; (c) Abortion; (d) Family Planning Service; (e) Treatment by a chemical dependency treatment program (outpatient, if minor is 13 years of age or older).

CONTACT INFORMATION

If you have any questions on Ready Meds Pharmacy's privacy practices or for clarification on anything contained within the Notice, please contact Anderson Jolly, RPh, at:

READY MEDS PHARMACY
1412 SW 43rd Street, Suite 120
Renton, WA 98057
Ph. 425-251-6335
Fax: 425-251-6337



NOTICE OF PRIVACY PRACTICES **EFFECTIVE: November 1, 2005**

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. THE PRIVACY OF YOUR HEALTH INFORMATION IS IMPORTANT TO US.

As part of the Federal Health Insurance Portability and Accountability Act of 1996, known as IDPAA, the pharmacy has created this Notice of Privacy Practices (Notice). This Notice describes the pharmacy's privacy practices and the rights you, the individual, have as they relate to the privacy of your Protected Health Information henceforth to be referred as (PHI). Your PID is information about you, or that could be used to identify you, as it relates to your past and present physical and mental health care services. The IDPAA regulations require that Ready Meds Pharmacy protect the privacy of your PHI that has been received or created.

Ready Meds Pharmacy will abide by the terms presented within this Notice. For any uses or disclosures that are not listed below, the pharmacy will obtain a written authorization from you for that use or disclosure, which you will have the right to revoke at any time, as explained in more detail below. Ready Meds Pharmacy reserves the right to change the pharmacy's privacy practices and this Notice. Revisions to the Notice will be posted in the pharmacy and upon your request, provided to you in a paper format.

HOW THE PHARMACY MAY USE AND DISCLOSE YOUR PROTECTED HEALTH INFORMATION (PHI)

The following are reasons for which the pharmacy is permitted, by law, to use and disclose your PID. Unless authorized by you will not disclose healthcare except if the disclosures are:

Uses and disclosures of Pill for Treatment: Ready Meds Pharmacy will use the PHI that we receive from you to fill your prescription and coordinate or manage your health care.

Uses and disclosures of Pill for Payment: Ready Meds Pharmacy will disclose your PHI to obtain payment or reimbursement from insurers for your health care services.

Use and disclosure of PHI for Health care Operations: Ready Meds Pharmacy will use PHI to conduct quality assessments, improvement activities, evaluate the pharmacy workforce, and detect or prevent health care fraud and abuse.

Ready Meds Pharmacy

Use and disclosure as required by law: Ready Meds Pharmacy is required to use or disclose PHI about you as required and as limited by law.

Uses and disclosure for Public Health Activities: Ready Meds Pharmacy may use or disclose PHI about you to a public health authority that is authorized by law to collect for the purpose of preventing or controlling disease, injury, or disability. Uses and disclosure about victims of abuse, neglect or domestic violence: Ready Meds Pharmacy may use or disclose PHI about you to a government authority if it is reasonably believed you are a victim of abuse, neglect or domestic violence.

Uses and disclosures for Sexually Transmitted Diseases (STD): Ready Meds Pharmacy will not disclose any information regarding individual's treatment for STD, except in situations where the subject of the information has provided us with a written authorization allowing the release or where we are authorized or required by state or federal law to make disclosure.

Uses and disclosures for health oversight activities: Ready Meds Pharmacy may use or disclose PHI about you to a health oversight for oversight activities that it is authorized by law to conduct.

Disclosures for judicial and administrative proceedings: Ready Meds Pharmacy may disclose PHI about you in the course of any judicial or administrative proceedings, provided that proper documentation is presented to the pharmacy.

Disclosures for law enforcement purposes: Ready Meds Pharmacy may disclose PHI about you to law enforcement officials for authorized purposes.

Uses and disclosures about the deceased: Ready Meds Pharmacy may disclose PHI about the deceased, or prior to, and in reasonable anticipation of an individual's death, to coroners, medical examiners, and funeral directors.

Uses and disclosures for cadaveric organ, eye or tissue donation purposes: Ready Meds Pharmacy may use and disclose PHI for the purpose of procurement, banking, or transplantation of organs, eyes, or tissues for donation purposes.

Uses and disclosures for research purposes: Ready Meds Pharmacy may use and disclose PHI about you for research purposes with a valid waiver of authorization from the research board. Otherwise, the pharmacy will request a signed authorization by the individual for all other research purposes.

Uses and disclosures to avert a serious threat to health or safety: Ready Meds Pharmacy may use or disclose PHI about you, if it is believed in good faith, and is consistent with any applicable law and standards of ethical conduct, to avert a serious threat to health or safety.

Disclosure for workers' compensation: Ready Meds Pharmacy may disclose PHI about you as authorized by and to the extent necessary to comply with workers' compensation laws or programs established by law.

Uses and disclosures for specialized government functions: Ready Meds Pharmacy may use or disclose PHI about you for specialized government functions including; military and veterans activities, national security and intelligence, protective services, department of state functions, and correctional institutions and law enforcement custodial situations.

Disclosures to business associates: Ready Meds may disclose PHI about you to the pharmacy's business associates for services that they may provide to or for the pharmacy.

OTHER USES AND DISCLOSURES:

Refill reminders: Ready Meds Pharmacy may contact you to remind you of your prescription upon such time they are ready to be refilled.

Information about treatment alternatives: Ready Meds Pharmacy may contact you to notify you of alternative treatments and/or products that may be available.

Health related benefits or services: Ready Meds Pharmacy may use your PID to notify you of benefits and services the pharmacy provides.

FOR ALL OTHER USES AND DISCLOSURES:

Ready Meds Pharmacy will obtain a written authorization from you for all other uses and disclosures of PHI, and the pharmacy will only use or disclose pursuant to such an authorization. In addition, you may revoke such an authorization in writing at any time. To revoke a previously authorized use or disclosure, please contact Sudhir Reddy.

YOUR HEALTH INFORMATION RIGHTS:

The following are a list of your rights in respect to your Protected Health Information (PHI).

Request restrictions on certain uses and disclosures of your PHI: You have the right to request additional restrictions of Ready Meds Pharmacy's uses and disclosures of your PHI; however, Ready Meds is not required to accommodate a request. If you wish to request additional restrictions, please place in writing the specific request and return it to the pharmacy or return to Sudhir Reddy.

The right to have your PHI communicated to you by alternate means or locations: You have the right to request that Ready Meds Pharmacy to communicate confidentially with you using an address or phone number other than your residence. However, state and federal laws require Ready Meds Pharmacy to have an accurate address and home phone number in case of emergencies. Ready Meds Pharmacy will consider all reasonable requests. If you wish to request a change in your communicating address and/or phone number, please inform the staff at Ready Meds Pharmacy with the alternative means of communication or location.

The right to inspect and/or obtain a copy of your PHI: You have the right to request access and/or obtain a copy of your PHI that is contained in the pharmacy for the duration the pharmacy maintains PHI about you. If you wish to inspect or obtain a copy of your PHI, please obtain a form, Request for Access to Records, from Ready Meds Pharmacy and return the completed form to Ready Meds Pharmacy or return to Sudhir Reddy. Please notify Ready Meds Pharmacy one week prior to the need of the documents. There may be a reasonable cost-based charge for photocopying documents. You will be notified in advance of incurring such charges, if any.

The right to amend your PHI: You have the right to request an amendment of the PHI Ready Meds Pharmacy maintains about you, if you feel that the PHI Ready Meds Pharmacy has maintained about you is incorrect or otherwise incomplete. Under certain circumstances we may deny your request for amendment. If we do deny the request, you will have the right to have the denial reviewed by someone we designate who was not involved in the initial review. You may also ask the Secretary, United States Department of Health and Human Services, or their appropriate designee, to review such a denial. If you wish to amend your PHI files, please obtain a form, Request for Amendment to PHI, from Ready Meds Pharmacy and return the completed form to the pharmacy or return to Sudhir Reddy.

The right to receive an accounting of disclosures of your PHI: You have the right to receive an accounting of certain disclosures of your PHI made by the pharmacy for a period of six (6) years. If you wish to receive an accounting of disclosures of your PHI, please obtain a form, Request for Accounting of Disclosures, from the pharmacy and return the completed form to Ready Meds Pharmacy or return to the Sudhir Reddy. You should be aware; however, that such an accounting excludes uses and disclosures made for treatment, payment, or health care operations purposes.

The right to receive additional copies of the Pharmacy's Notice of Privacy Practices: You have the right to receive additional paper copies of this Notice, upon request, even if you initially agreed to receive the Notice electronically.

If you wish to receive a paper copy of this request, please ask a pharmacy staff or Pharmacist, and they will provide you with a copy.

REVISIONS TO THE NOTICE OF PRACTICES

Ready Meds Pharmacy reserves the right to change and/or revise this Notice and make the new revised version applicable to all PHI received prior to its effective date. The revised Notice will be available, upon request; to all individuals. Ready Meds Pharmacy will also post the revised version of the Notice in the pharmacy.

COMPLAINTS

If you believe your privacy rights have been violated, you may file a complaint with Ready Meds Pharmacy and/or to the Secretary of HHS, or their designee. If you wish to file a complaint with Ready Meds Pharmacy, please contact Sudhir Reddy. If you wish to file a complaint with the Secretary, please write to:

**The U.S Department of Health and Human Services
200 Independence Ave. SW
Washington, DC 20201**

Ready Meds Pharmacy will not take any adverse action against you as a result of your filing of a complaint.