



NOTICE OF PRIVACY PRACTICES

EFFECTIVE APRIL 14, 2003

REVISED APRIL 7, 2011

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.

United Supermarkets, L.L.C. complies with the federal Health Insurance Portability and Accountability Act (HIPAA) of 1996 as amended by the Health Information Technology for Economic and Clinical Health Act of 2009 (HITECH Act), including all pertinent regulations issued by the Department of Health and Human Services.

Accordingly, United Supermarkets, L.L.C., on behalf of its pharmacies (Pharmacy), has created this Notice of Privacy Practices (Notice). This Notice, as required by law, describes the Pharmacy privacy practices and the rights you have as a customer related to the privacy of your Protected Health Information (PHI). Your PHI is information about you, or that could be used to identify you, as it relates to your past and present physical and mental healthcare services.

HOW THE PHARMACY MAY USE AND DISCLOSE YOUR PHI

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.

The following explains the ways in which the Pharmacy is permitted, by law, to use and disclose your PHI. With certain exceptions, we may not use or disclose any more of your PHI than is necessary to accomplish the purpose of the use or disclosure. This Notice applies to all information maintained by the Pharmacy.

PAYMENT AND HEALTHCARE OPERATIONS

Your PHI may be used without your authorization for payment and healthcare operations.

Payment: The Pharmacy will disclose your PHI to obtain payment or reimbursement from insurers for your healthcare services.

Healthcare Operations: The Pharmacy will use the PHI that we receive from you to fill your prescription and coordinate or manage your healthcare services. Additionally, the Pharmacy will use your PHI during routine healthcare operations including, but not limited to, conducting quality assessments, improving activities, and evaluating the pharmacy workforce.

Business Associates: We may use and disclose your PHI to business associates for services they may provide to or for the Pharmacy. Examples of business associates and their respective functions include, but are not limited to, third party administrators (TPA's) to process payment for your healthcare claims or data warehousing services for maintaining copies (electronic or paper) of your healthcare claim information, etc. We require our business associates to protect the confidentiality of your PHI and to comply with the provisions documented and described in this Notice.

Health Related Business and Services: The Pharmacy may use or disclose your PHI to notify you of health-related benefits or services that may be of interest to you, to remind you when it's time refill a prescription, or to notify you of alternative treatments and/or products.



OTHER USES AND DISCLOSURES THAT DO NOT REQUIRE YOUR AUTHORIZATION

The Pharmacy may use and disclose your PHI without your authorization for the specific purposes described below.

Uses and disclosures as required by law: The Pharmacy will disclose your PHI when required to do so by federal, state, or local law.

Uses and disclosures for public health activities: The Pharmacy may use or disclose PHI about you to a public health authority that is authorized by law to collect PHI for the purpose of preventing or controlling disease, injury or disability.

Uses and disclosures about victims of abuse, neglect or domestic violence: The Pharmacy may use or disclose PHI about you to a government authority if it reasonably believed that you are a victim of abuse, neglect or domestic violence.

Uses and disclosures for health oversight activities: The Pharmacy may disclose your PHI to a health oversight agency for activities authorized by law, including, but not limited to licensure, certification, audits, investigations and inspections. The Pharmacy may provide your PHI to assist the government when it conducts an investigation or inspection. However, the Pharmacy may not disclose your PHI if you are the subject of such investigation or inspection and the investigation is not directly related to healthcare you may have received.

Uses and disclosures for judicial and administrative proceedings: If you are involved in a lawsuit or dispute, the Pharmacy may disclose your PHI in response to a valid court order, discovery request, or other lawful process.

Uses and disclosures for law enforcement purposes: The Pharmacy may disclose your PHI for law enforcement purposes as permitted or required by law or in response to a court order.

Uses and disclosures about the deceased: The 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: The Pharmacy may use and disclose PHI for the purpose of procurement, banking, or transplantation of cadaveric organs, eyes, or tissues for donation purposes.

Uses and disclosures for research purposes: The 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: In order to avoid a serious threat to the health and safety of a person or the public, the Pharmacy may disclose PHI to law enforcement personnel or persons able to prevent or lessen such harm.

Uses and disclosures for specialized government functions: The Pharmacy may disclose your PHI for specific government functions related to military or veterans, national security, protection of the President of the United States, correctional institutions and inmates, or conducting intelligence operations.

Uses and disclosures for workers' compensation: The Pharmacy may release your PHI for workers' compensation or similar programs or to comply with workers' compensation laws.

Uses and disclosures for disaster relief purposes: The Pharmacy may disclose PHI about you as authorized by law to a public or private entity to assist in disaster relief.

For data breach notification purposes: The Pharmacy may use your contact information to provide legally-required notices of unauthorized acquisition, access, or disclosure of your health information. We may send notice directly to you and/or to the department of Health and Human Services.

DISCLOSURES REQUIRING YOUR AUTHORIZATION

Except as previously described in this Notice, the 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.

YOUR HEALTH INFORMATION RIGHTS

Although all information concerning your Pharmacy membership with the Pharmacy is the property of the Pharmacy, you have the following rights regarding your PHI.

Right to Revoke Authorization: If you have provided the Pharmacy with a written authorization to use or disclose your PHI for a certain purpose, you have the right to revoke that, EXCEPT to the extent that action has already been taken in reliance on your authorization.

Request restrictions on certain uses and disclosures of your PHI: You have the right to request restrictions on certain uses and disclosures of your PHI; however, the Pharmacy is not required by law to accommodate your requested restriction. If you wish to request a restriction, please obtain the form, *Request for Restriction of Uses & Disclosures*, from the Pharmacy and return the completed form to the Pharmacy.

The right to have your PHI communicated to you by alternate means or locations: You have the right to request that the Pharmacy communicate confidentially with you using an address or phone number other than your residence (e.g., contact you only at work). However, state and federal laws require the Pharmacy to have an accurate address and home phone number in case of emergencies. The Pharmacy will consider all reasonable requests. You must make this request in writing to the Pharmacy and you must state the reason why the disclosure of information, using your residential address or phone number, could endanger you. If you wish to request confidential communications using an alternative address and/or phone number, please obtain a form, *Request for Alternative Arrangements for Confidential Communication*, from the Pharmacy and return the completed form to the Pharmacy.

The right to inspect and/or obtain a copy your PHI: You have the right to inspect and/or copy your PHI that is maintained by the Pharmacy. If you wish to inspect or obtain a copy of your PHI, please obtain a form, *Request for Access to Records*, from the Pharmacy and return the completed form to the Pharmacy. There may be a reasonable cost-based charge, as allowed by state or federal law, 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 the Pharmacy maintains about you, if you feel that the PHI is incorrect or otherwise incomplete. We are not required by federal law to honor your request for amendment if we determine, among other things, that the PHI is accurate and complete. If we deny your request, you will have the right to have the denial reviewed by a designated individual who was not involved in the initial review. If you wish to amend your PHI files, please obtain a form, *Request for Amendment to PHI*, from the Pharmacy and return the completed form to the Pharmacy.

The right to receive an accounting of disclosures of your PHI: You have the right to receive an accounting of the disclosures of your PHI made by the Pharmacy, except those disclosures made for treatment, payment, or healthcare operations, those disclosures for which you have authorized, or pursuant to this Notice. 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 the Pharmacy.

The right to receive additional copies of this 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 request Pharmacy personnel to provide you with a copy.



TO REPORT A PROBLEM

If you believe your privacy rights have been violated, you may file a complaint with United Supermarkets, Ltd., or with the U.S. Secretary of the Department of Health and Human Services. Complaints should be reported in writing to:

United Supermarkets L.L.C.
SuzAnn Kirby
7830 Orlando Avenue
Lubbock, TX 79423

OR

The U.S Department of Health and Human Services
200 Independence Ave, S.W.
Washington, D.C. 20201

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

REVISIONS TO THIS NOTICE OF PRIVACY PRACTICES

The Pharmacy will abide by the terms of the Notice currently in effect. The Pharmacy reserves the right to change and/or revise this Notice and make the new provisions effective for all customers' PHI we maintain. The revised Notice will be available, upon request, to all individuals. The Pharmacy will also post the revised version of the Notice on our website.

CONTACT INFORMATION

If you have any questions or would like additional information on the Pharmacy's privacy practices or for clarification on anything contained within the Notice, please contact:

United Supermarkets, L.L.C.
Tim Purser
7830 Orlando Avenue
Lubbock, TX 79423
(806) 791-0220