

NOTICE OF PRIVACY PRACTICES

VillageRx Pharmacy

THIS NOTICE DESCRIBES HOW YOUR HEALTH INFORMATION MAY BE USED AND DISCLOSED AND HOW YOU CAN ACCESS IT. PLEASE READ THIS CAREFULLY.

Your Privacy Matters to Us

VillageRx Pharmacy is required by law to protect the privacy of your Protected Health Information ("PHI"), to notify you about how we handle that information, and to follow the terms of this Notice. We will also notify you promptly if there is ever a breach of your unsecured PHI.

ABOUT THIS NOTICE

This Notice covers VillageRx Pharmacy and our staff, workforce members, and any affiliated entities who help us provide and coordinate your care. All of these individuals and entities are bound by the terms in this Notice.

Protected Health Information (PHI) means any information that could identify you and that relates to your past, present, or future physical or mental health condition, the health care products or services provided to you, or the payment for those services.

We reserve the right to update this Notice at any time. If we make changes, the updated Notice will be posted in our pharmacy and on our website, and is effective for all PHI we hold — both existing and new. You may request a copy of the current Notice at any time.

PART I — HOW WE MAY USE & DISCLOSE YOUR PHI WITHOUT YOUR AUTHORIZATION

Except where state or federal law requires additional protections, we may use or share your PHI for the following purposes without first asking your permission. Note that certain types of information — including HIV-related records, substance use disorder treatment records, mental health records, and genetic information — may have additional legal protections, and we comply with all applicable laws.

Treatment

We use and share your PHI to provide, coordinate, and manage the medications and health services you receive. This includes sharing information with pharmacists, physicians, nurses, pharmacy technicians, and

other care team members — as well as hospitals, other pharmacies, and health care facilities — so everyone involved in your care has what they need to support you.

Payment

We may use and disclose your PHI to collect payment for the products and services we provide. For example, we may contact your insurance company, pharmacy benefit manager, or other health plan to confirm coverage or determine your cost-sharing amount. Billing records may include your name, the services you received, and medications prescribed. We may also share PHI with other health care providers for their payment-related needs.

Health Care Operations

We may use your PHI to run our pharmacy effectively — for example, to review staff performance, improve the quality of services we provide, support training, and conduct business planning. We may also analyze PHI in a de-identified (stripped of personal identifiers) format to improve health outcomes and care efficiency.

Other Permitted Disclosures (No Authorization Needed)

We may also share your PHI — without your written permission — in the following situations:

Business Partners (Business Associates)

We work with third-party vendors (such as billing companies or consultants) who may need access to your PHI to perform services on our behalf. These vendors are legally required to safeguard your PHI and use it only for the agreed-upon purpose.

Family Members & Personal Representatives

We may share relevant PHI with a family member, close friend, or other person you identify as involved in your care or payment. We will also treat anyone with legal authority to make health care decisions on your behalf as your personal representative.

Food & Drug Administration (FDA)

We may share PHI with the FDA when required — such as for reporting adverse drug reactions, product defects, or to support recalls.

Workers' Compensation

We may disclose your PHI to the extent required by workers' compensation laws or similar programs.

Public Health Reporting

We may share PHI with public health authorities responsible for preventing or controlling disease, injury, or disability, including the FDA and agencies monitoring workplace health and safety.

Law Enforcement

We may disclose PHI to law enforcement when required or permitted by law — for example, in response to a court order, subpoena, or lawful request.

As Required by Law

We will disclose your PHI whenever federal, state, or local law obligates us to do so.

Health Oversight

We may share PHI with government oversight agencies for authorized activities such as audits, inspections, investigations, and credentialing.

Legal Proceedings

If you are involved in a lawsuit or dispute, we may disclose your PHI in response to a court or administrative order, or in response to a subpoena or discovery request (with appropriate safeguards in place).

Research

We may use or share your PHI for approved research projects, provided the research has been reviewed by an institutional review board or privacy board with proper protections in place.

Coroners, Medical Examiners & Funeral Directors

We may release PHI to coroners, medical examiners, and funeral directors as permitted by law.

Organ & Tissue Donation

We may share PHI with organ procurement organizations when relevant to donation or transplantation.

Notifications & Disaster Relief

We may share PHI to notify a family member or personal representative of your location or condition, or to assist with disaster relief coordination.

Fundraising

We may contact you about pharmacy fundraising programs. You have the right to opt out of such communications at any time, and we will explain how in any materials we send.

Correctional Facilities

If you are an inmate, we may disclose PHI necessary for your health or the safety of others within the facility.

Serious Threats to Safety

We may use or disclose PHI when necessary to prevent a serious and imminent threat to your health or safety or that of another person or the public.

Military, Veterans & National Security

We may share PHI with military command authorities or federal officials for authorized military, intelligence, or national security purposes.

Abuse or Neglect

If we reasonably believe you are a victim of abuse or neglect, we may disclose PHI to government authorities as required by law or to prevent serious harm.

PART II — USES & DISCLOSURES THAT REQUIRE YOUR WRITTEN AUTHORIZATION

For the following purposes, VillageRx Pharmacy will only use or disclose your PHI after obtaining your signed written authorization (unless an exception under applicable law applies):

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- Psychotherapy notes
 - Marketing communications
 - Sale of your PHI
 - Any other use or disclosure not described in this Notice or permitted by law

You have the right to revoke any authorization you give us, in writing, at any time. Once we receive your revocation, we will stop using or disclosing your PHI for that purpose — except for actions we have already taken based on your prior authorization.

YOUR RIGHTS REGARDING YOUR PHI

You have the following rights with respect to your health information. To exercise any of them, submit a written request to our Privacy Officer (contact information below).

Right to a Paper Copy of This Notice

You may request a printed copy of this Notice at any time — even if you agreed to receive it electronically. Simply ask at the pharmacy or contact our Privacy Officer.

Right to Request Restrictions

You may ask us in writing to limit how we use or share your PHI for treatment, payment, or operations purposes. We are not required to agree — except when you ask us not to share information with your health plan for a service you paid for entirely out of pocket, in which case we must honor your request. Speak with your pharmacist before or when dropping off your prescription if you'd like to keep certain information from your insurer.

Right to Inspect & Obtain a Copy of Your PHI

You have the right to review and receive copies of the PHI we maintain about you. If we keep electronic records, you may request an electronic copy if readily producible. You can also direct us in writing to send your PHI to another person or entity. Certain limited exceptions apply; if we deny your request, you have the right to ask that the denial be reviewed.

Right to Request an Amendment

If you believe your PHI is incomplete or incorrect, you may ask us in writing to amend it. We are not required to make every requested change, but if we deny your request, we will explain our reason in writing.

Right to an Accounting of Disclosures

You may request a written list of certain disclosures we have made of your PHI over the past six years. This does not include disclosures for treatment, payment, operations, or those you authorized.

Right to Communicate in a Different Way or Location

You may ask us to reach you through a specific phone number, address, or email rather than the one on file. We will accommodate reasonable requests. Please note: if you choose email, it may not be fully secure, and there is some risk that your information could be intercepted. If we cannot reach you through your preferred method, we may use the information we have on file.

Right to Breach Notification

If there is ever a breach of your unsecured PHI, we will notify you promptly and in accordance with federal law.

CONTACT & COMPLAINTS

VillageRx Pharmacy

Privacy Officer

546 Duane St., Glen Ellyn, IL 60137

Phone: (630) 534-9161

Fax: (312) 312-9636

U.S. Dept. of Health & Human Services

Office for Civil Rights (OCR)

Phone: 1-800-368-1019 | TDD: 1-800-537-7697

www.hhs.gov/ocr/privacy

200 Independence Ave. S.W., Washington, DC
20201

If you have questions about our privacy practices, please reach out to our Privacy Officer at any time. If you believe your privacy rights have been violated, you may file a complaint with us or directly with the U.S. Department of Health and Human Services Office for Civil Rights. You will never be penalized or retaliated against for filing a complaint.

Effective Date: January 29, 2024 · Last Reviewed: January 2, 2026

45 C.F.R. Parts 160 and 164 — Health Insurance Portability and Accountability Act (HIPAA) of 1996