



## *MinuteClinic\**

# 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

During your treatment at MinuteClinic, our caregivers may gather information about your medical history and current health. This Notice of Privacy Practices explains how that information may be used and shared with others. It also explains your privacy rights regarding this information.

MinuteClinic is required by law to abide by the terms of this Notice, to make sure that information that identifies you is kept private, and to give you this Notice of our legal duties and practices with respect to medical information about you.

#### Uses and Disclosures of your Health Information

- MinuteClinic may use health information to carry out treatment, payment and health care operations.
  - Treatment is the provision, coordination or management of health care. For example, we may use and disclose your information to consult with a third party or to refer you to other health care providers. We will get your written consent prior to making disclosures outside MinuteClinic for treatment purposes, except in emergencies.
  - Payment includes the activities necessary to obtain reimbursement for the provision of health care. For example, we may need to give your health plan information about treatment you received at MinuteClinic so your health plan will pay us or reimburse you for the treatment. We will get your written consent prior to making disclosures for payment purposes.
  - Health care operations include the activities necessary for MinuteClinic to run its business operations. For example, we may use your information to review treatment and services and to evaluate the performance of our staff.
- We may use or disclose your health information:
  - When required by federal, state, or local law.
  - To support public health activities by reporting as required or authorized by state or federal law. These reports may include the reporting of exposure to a communicable disease or risk of spreading a disease or condition.
  - To cooperate with law enforcement officials for certain law enforcement purposes as directed by a court order, warrant, criminal subpoena, or other lawful process.
  - To report abuse or neglect.
  - To support health oversight activities that are authorized by law, such as administrative or criminal investigations, inspections, licensure or disciplinary actions and other similar

activities necessary for appropriate oversight of government benefit programs or functions.

- When required by a coroner or medical examiner for the purpose of identifying a deceased person, determining a cause of death or other duties as required by law.
- When necessary to prevent or lessen a serious and imminent threat to the health and safety of a person or the public and the disclosure is to a person reasonably able to prevent or lessen the threat, as consistent with applicable law and standards.
- For judicial or administrative proceedings, in response to a valid court order, administrative order, a grand jury subpoena, or with your written consent.
- For research purposes, with your written authorization or as permitted by state law.
- To business associates to perform functions on MinuteClinic's behalf, if the business associate has signed an agreement to protect the confidentiality of the information.

3. We may disclose your health information to a family member, other relatives, or a close friend or any other person you identify if the information relates to that person's involvement in your health care if you consent to such a disclosure. If you are unable to agree or object to the use or disclosure, we may disclose such information as necessary if we determine that it is in your best interest.

4. In other situations, your written authorization will be obtained before MinuteClinic will use or disclose your health information to third parties outside MinuteClinic.

5. State and federal laws may be more stringent and may prohibit certain uses and disclosures identified above. When another law is more stringent than HIPAA, we will follow the more stringent requirements. For example, some state laws require additional protection for records related to mental health treatment, drug and alcohol treatment, and HIV-related information.

#### Patient Rights

- You may request MinuteClinic to restrict uses and disclosures of your health information. However, MinuteClinic is not required to agree to the requested restriction. These requests should be made to MinuteClinic, Privacy Office. Requests must be made in writing. In your request, you must tell us (a) what information you want to limit; (b) whether you want to limit MinuteClinic's use, disclosure, or both, and (c) to whom you want the limits to apply, for example, if you want to prohibit disclosures to your spouse.
- You have the right to request confidential communications by alternative means or at alternative locations. For example, you may request that we communicate with you only by mail. We will accommodate all reasonable requests, but your request must specify how or where you wish to be contacted, and we may require you to provide information about how payment will be handled. You must request confidential communications in writing.
- You have a right to inspect and obtain a copy of your health information that is used to make decisions about your care for as long as MinuteClinic maintains the information. This right does not apply to certain health information, including information compiled in reasonable anticipation of or for



litigation and other information not subject to the right to access information under state law and HIPAA. Requests for access to health information should be made in writing to MinuteClinic, Privacy Office. If access is denied, you will be provided with a written explanation that sets forth the basis for the denial, a description of how you may review those rights and a description of how you may complain.

4. You have the right to request that MinuteClinic amend your health information if it is incorrect or incomplete. Requests for amendment of information should be made in writing to MinuteClinic, Privacy Office, and you must provide a reason that supports your request to have the information changed. MinuteClinic may deny your request for an amendment if the request is not in writing and submitted to the Privacy Office. In addition, we may deny your request if you ask us to amend information that: (a) was not created by MinuteClinic (unless the person or entity that created the information is no longer available to make the amendment); (b) is not part of the medical information kept by MinuteClinic; (c) is not part of the information you would be permitted to inspect and copy; or (d) is accurate and complete.

5. At your request, MinuteClinic will provide you with an accounting of disclosures by MinuteClinic of your health information during the six years prior to the date of your request. However, such accounting will not include disclosures made: 1) to carry out treatment, payment or health care operations; 2) directly to you or your personal representatives; 3) prior to the effective date of this notice; or 4) based on your written authorization. If you request more than one accounting within a 12-month period, MinuteClinic will charge a reasonable, cost-based fee for each subsequent accounting. Requests for a request of an accounting of disclosures should be made in writing to MinuteClinic, Privacy Office.

6. To obtain a paper copy of this notice, contact MinuteClinic, Privacy Office.

7. You may exercise your rights through a personal representative as permitted or required by applicable law. Your personal representative may be required to produce evidence of authority to act on your behalf before that person will be given access to your information or allowed to take any action for you.

8. If you believe your privacy rights have been violated you may complain to the MinuteClinic Privacy Office. You may also file a complaint with the Secretary of the U.S. Department of Health and Human Services. All complaints should be submitted in writing. You will not be penalized in any way for filing a complaint.

#### MinuteClinic Duties

This Notice is effective beginning **January 26, 2006**. However, MinuteClinic reserves the right to change its privacy practices and this Notice, and to apply the changes to any health information received or maintained by MinuteClinic prior to the date of the changes. If the terms of this Notice are changed, a revised version will be available upon request and will be posted in a clear and prominent location. You may access the notice by visiting our website at: [www.MinuteClinic.com](http://www.MinuteClinic.com)

#### Complaints, Questions, and Requests

You may direct your questions about this Notice or MinuteClinic's privacy practices, requests regarding your information, or other privacy or confidentiality concerns to:

MinuteClinic Privacy Office  
One CVS Drive  
Woonsocket, RI 02895

*\* MinuteClinic includes MinuteClinic, L.L.C. and its affiliated companies and unaffiliated professional corporations not owned or operated by MinuteClinic, L.L.C. MinuteClinic, L.L.C. provides administrative services and support to the unaffiliated professional corporations. Please visit [www.MinuteClinic.com](http://www.MinuteClinic.com) for service locations.*