

Atlas Rx Pharmacy

Notice of Privacy Practices (HIPAA Privacy Policy)

Effective Date: October 21, 2025

Important Notice

This document explains how your medical and prescription information may be used, shared, and protected by Atlas Rx Pharmacy. It also outlines the rights you have concerning your personal health information. Please review this Notice thoroughly to understand your rights and our responsibilities.

1. Who We Are

This Notice applies to Atlas Rx Pharmacy (“Atlas Rx,” “we,” “our,” or “us”), including all employees, contractors, and systems operating under our name. It covers all pharmacy services, communications, and digital platforms owned or managed by Atlas Rx Pharmacy.

2. Your Rights Regarding Your Health Information

You are the owner of your health information, and you have certain rights regarding how it’s accessed and shared. Atlas Rx takes those rights seriously.

You have the right to:

- **Access Your Records:**
You can ask to review or obtain a copy of your pharmacy or medical records, whether in paper or electronic format. We’ll provide them within 30 days (or sooner if required by law) and may charge a reasonable fee for copies.
- **Request a Correction:**
If you believe your record is inaccurate or incomplete, you may request an amendment. We’ll respond, in writing, within 60 days and explain our decision if we deny the request.
- **Control How We Contact You:**
You may ask us to communicate with you in a specific way (e.g., only by email or at a different address). We will accommodate reasonable requests.
- **Limit Information Sharing:**
You can request restrictions on how we use or disclose your health information. Although we’re not required to agree to every restriction, we’ll honor reasonable ones, especially if you’ve paid for a service entirely out of pocket and wish to keep it private from your insurer.
- **Get a List of Disclosures:**
You can ask for a record of when we shared your health information, except for disclosures related to treatment, payment, and daily operations. This list can cover up to six years.
- **Obtain a Copy of This Notice:**
You can request a printed or electronic copy at any time. It’s also available at atlasrxpharmacy.com/privacy.

- **Appoint a Representative:**

If you have given someone legal authority to act for you (e.g., via power of attorney), that person can exercise your privacy rights on your behalf.

- **Submit a Complaint:**

If you believe your privacy rights have been violated, you can contact us directly (see Section 9). You can also report concerns to the U.S. Department of Health & Human Services, Office for Civil Rights. We will never retaliate against you for filing a complaint.

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3. How We Use and Share Your Health Information

Atlas Rx uses and shares your information to support your treatment, manage operations, and comply with legal obligations. We do not sell your information.

Common Uses

- **Treatment:**

We use and share information with your healthcare providers to fill prescriptions, prevent harmful drug interactions, and coordinate your care.

- **Payment:**

We may share information with your insurance company to verify coverage, process claims, or obtain prior authorization.

- **Operations:**

We use PHI to improve pharmacy services, perform audits, train staff, and ensure quality and compliance.

Other Permitted or Required Disclosures

We may disclose information without your authorization in certain cases, such as:

- Public health and safety matters (e.g., medication recalls, adverse event reporting)
- Research and analytics (only when de-identified or legally authorized)
- Law enforcement or government compliance (when required by law)
- Medical examiners or funeral directors (to identify a deceased person or determine cause of death)
- Workers' compensation or court orders
- National security or military activities
- Business associates who perform services for us under HIPAA-compliant agreements (e.g., billing or IT support)

Uses Requiring Written Authorization

We will not use or disclose your PHI for the following without your express written consent:

- Marketing communications (unless face-to-face or of minimal value)
- Sale of your PHI

- Release of psychotherapy notes (if applicable)
You may revoke any written authorization at any time in writing.

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4. Our Duties to You

Atlas Rx is committed to protecting the confidentiality and security of your PHI. Specifically:

- We follow federal HIPAA regulations and applicable state privacy laws.
- We notify you promptly if a breach involving your information occurs.
- We only use or disclose your PHI as described in this Notice or as required by law.
- We review our policies regularly and train our employees to maintain compliance.

5. Your Communication Preferences

You may choose how we contact you—by mail, phone, text, or email. Please note that electronic communications (like email or text) may not be fully secure unless encrypted. You may update your preferences at any time by contacting us.

6. How We Protect Your Information

Atlas Rx uses multiple layers of protection to safeguard your PHI:

- Secure, password-protected systems
- Encryption for electronic data
- Controlled facility access
- Employee training and confidentiality agreements
- Vendor compliance monitoring

We continually update our systems and practices to meet or exceed industry security standards.

7. U.S. states where Atlas Rx provides compounding or fulfillment services.

- Florida (FL)
- Iowa (IA)
- Kansas (KS)
- Nebraska (NE)
- New Mexico (NM)
- North Dakota (ND)
- South Dakota (SD)
- Wyoming (WY)
- Minnesota (MN)

- Vermont (VE)
- Idaho (ID)

8. Breach Notification

If your PHI is ever involved in a security incident or unauthorized disclosure, Atlas Rx will notify you without unreasonable delay—no later than 60 days after we learn of the event. If more than 500 individuals are affected, we'll also notify government agencies and, when appropriate, local media outlets, as required by law.

9. Changes to This Notice

Atlas Rx reserves the right to revise this Notice as privacy laws or our practices evolve. Any updates will apply to both existing and future health information. The effective date at the top reflects the most recent revision. Updated versions will always be available online and in our pharmacy.

10. Contact Information – Privacy Official

Privacy Officer: Atlas Rx Pharmacy

Address: 11923 Pacific Street, Suite A, Omaha, NE 68154

Phone: 866-206-7936

Email: info@atlasrxpharmacy.com

You may also contact the U.S. Department of Health & Human Services, Office for Civil Rights via their website or by mail. We will never penalize or retaliate against you for exercising your privacy rights.

11. Availability

You can review or request a copy of this Notice in person, by mail, or online at atlasrxpharmacy.com/privacy. Printed copies are available upon request at all pharmacy locations.

Summary

Atlas Rx Pharmacy respects your privacy and takes every measure to keep your information secure. Your health data belongs to you, we're here to protect it, manage it responsibly, and help you access it when needed.