

NOTICE OF PRIVACY PRACTICES

Innova Rx Inc., dba Cedarmak Pharmacy

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.

Effective Date: 1/1/2026

1. Our Responsibilities

Cedarmak Pharmacy is required by law to:

- Maintain the privacy of your Protected Health Information (“PHI”)
- Provide you with this Notice of our legal duties and privacy practices
- Follow the terms of the Notice currently in effect
- Notify you if a breach occurs that may have compromised the privacy or security of your PHI

2. How We May Use and Disclose Your Health Information

We may use and disclose your PHI without your written authorization for the following purposes:

A. Treatment

We may use and share your PHI to provide, coordinate, or manage your pharmacy care, including:

- Filling prescriptions
- Consulting with prescribers
- Drug utilization review
- Medication therapy management
- Refill reminders

Example: We may contact your doctor to clarify a prescription.

B. Payment

We may use and disclose your PHI to obtain payment for pharmacy services, including:

- Billing insurance plans

- Verifying coverage or eligibility
- Collecting copayments

Example: We may share information with your health plan to process a claim.

C. Health Care Operations

We may use and disclose your PHI for pharmacy operations, including:

- Quality assurance
- Compliance activities
- Audits
- Fraud detection
- Staff training

Example: Reviewing records to ensure accurate dispensing.

3. Other Permitted Uses and Disclosures

We may also use or disclose your PHI:

- To comply with laws and regulations
- For public health activities (e.g., recalls, adverse event reporting)
- To report abuse, neglect, or domestic violence
- For health oversight activities (e.g., inspections, investigations)
- For judicial or administrative proceedings
- To law enforcement when required by law
- To coroners, medical examiners, or funeral directors
- For organ donation purposes
- To prevent a serious threat to health or safety
- For workers' compensation claims

4. Uses and Disclosures Requiring Your Written Authorization

We will not use or disclose your PHI for the following purposes without your written authorization:

- Marketing communications (where required by law)
- Sale of your PHI
- Any use or disclosure not described in this Notice

You may revoke an authorization at any time in writing, except where we have already relied on it.

5. Your Rights Regarding Your Health Information

You have the following rights regarding your PHI:

A. Right to Inspect and Obtain Copies

You may request access to your PHI in paper or electronic format.

We may charge a reasonable, cost-based fee for copies.

B. Right to Request an Amendment

If you believe your PHI is incorrect or incomplete, you may request a correction.

We may deny the request if the information is accurate or was not created by us.

C. Right to an Accounting of Disclosures

You may request a list of disclosures of your PHI made during the past six (6) years, excluding certain routine disclosures.

D. Right to Request Restrictions

You may request limits on how we use or disclose your PHI.

We are not required to agree, except for requests to restrict disclosures to a health plan when you pay out-of-pocket in full.

E. Right to Request Confidential Communications

You may request that we contact you in a specific way or at a specific location (e.g., only by mail).

F. Right to a Paper Copy

You may request a paper copy of this Notice at any time, even if you agreed to receive it electronically.

6. Complaints

If you believe your privacy rights have been violated, you may file a complaint:

With Cedarmak Pharmacy:

Privacy Officer

Cedarmak Pharmacy

Email: info@cedarmak.com

Phone: (424) 303-7860

Address: 8737 Beverly Blvd Ste. 102 West Hollywood, CA 90048

Or with the U.S. Department of Health and Human Services:

Office for Civil Rights

200 Independence Avenue, S.W.

Washington, D.C. 20201

Phone: 1-877-696-6775

Website: www.hhs.gov/ocr

You will not be retaliated against for filing a complaint.

7. Changes to This Notice

We reserve the right to change this Notice and make the new Notice effective for all PHI we maintain. Updated Notices will be available:

- On our website
- At our pharmacy locations
- Upon request

8. Contact Information

If you have questions about this Notice or your privacy rights, please contact:

Cedarmak Pharmacy

Attn: Privacy Officer

Email: info@cedarmak.com

Phone: (424) 303-7860

9. Acknowledgment of Receipt

You may be asked to sign an acknowledgment confirming that you received this Notice. Your care will not be conditioned on signing the acknowledgment.