

Pharmacy 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.

I. Our Commitment to Your Privacy

Lewis Drugs, Inc. and Lewis Family Drug LLC. (referenced as “Lewis” and “the Company”) are required by law to maintain the privacy of Protected Health Information (“PHI”) and to provide you with notice of our legal duties and privacy practices regarding PHI. Lewis and all its employees involved in providing and coordinating healthcare are bound to follow the terms of this Notice of Privacy Practices (“Notice”) and to notify affected individuals following a breach of unsecured protected health information.

PHI is information about you, including basic demographic information, that may identify you and relates to your past, present, or future physical or mental health or condition and related healthcare services. This Notice describes how the Lewis pharmacies (and certain related areas within the Company) may use and disclose PHI to carry out treatment, payment, or healthcare operations and for other specified purposes permitted or required by law. This Notice also describes your rights with respect to your PHI.

To help you better understand this Notice:

1. Whenever this Notice uses the word “Pharmacy” or “Pharmacies”, it means one or more of the pharmacies Lewis operates in its stores.
2. Whenever this Notice uses the word “we”, “us” or “our”, it means the Lewis Pharmacies and certain groups within Lewis involved in Pharmacy operations.

We are required to follow the terms of this Notice. We will not use or disclose PHI about you without your written authorization, except as described in this Notice or as otherwise permitted or required by law.

II. Changes to this Notice

We reserve the right to revise, change, or amend our practices and this Notice. Any new Notice will be effective for all PHI we already have about you, as well as any of your PHI we may receive, create, or maintain in the future. We will provide access to a copy of our current Notice in a prominent location at our pharmacies and on our website at www.lewisdrug.com. You may also request a paper copy of our current Notice at any time.

III. Your Health Information Rights

You have the following rights concerning your PHI:

- Obtain a paper copy of the Notice: You can request a copy of this Notice at any time. Even if you have agreed to receive it electronically, you are still entitled to a paper copy. Just stop by your local Pharmacy to pick one up or send a written request to the Company’s Privacy Officer at the Notice Address provided in Section VII.
- Request a restriction on certain uses and disclosures of PHI: You have the right to request additional restrictions on how we use or disclose your PHI by sending a written request to our Privacy Officer at the Notice Address. Please clearly and concisely identify: (i) the information you wish to be restricted; (ii) how you want the information restricted; and (iii) to whom you want the limits to apply. While we will consider all requests, we are generally not required to agree to these restrictions, except for one specific instance: we must agree to a request by you to restrict disclosure of PHI to a health plan if (A) the disclosure is for the purpose of carrying out payment or healthcare operations and is not otherwise required

by law; and (B) the PHI pertains solely to a healthcare item or service for which you, or someone on your behalf other than the health plan, has paid us in full. If we agree to any other restrictions, we will comply with them, except when otherwise required by law, in emergencies, or when the information is necessary to treat you.

- **Inspect and obtain a copy of PHI:** You have the right to access and copy PHI about you that we use to make decisions about you – known as a “designated record set” – for as long as a Lewis Pharmacy maintains that PHI. This usually includes prescription and billing records. To inspect or copy your PHI, you must send a written request to the Company’s Privacy Officer at the Notice Address. We may charge a reasonable fee for the costs associated with copying and mailing your request. If we deny your request in certain limited circumstances, you may request that the denial be reviewed by sending a written request to the Company’s Privacy Officer at the Notice Address. You also have the right to receive an electronic copy of your PHI if it is maintained by us electronically. Please specify your preferred electronic format in your written request.
- **Request an amendment of PHI:** If you believe PHI we maintain about you is incomplete or incorrect, you may request that we amend it. You can request an amendment for as long as we maintain the PHI. To request an amendment, you must send a written request to the Company’s Privacy Officer at the Notice Address, including a reason to support your request. In certain cases, we may deny your request. If we do, you have the right to file a statement of disagreement with the decision by sending your statement to the Privacy Officer at the Notice Address, and we may provide a rebuttal to your statement.
- **Receive an accounting of disclosures of PHI:** You have the right to receive an accounting of certain disclosures we have made of your PHI. This accounting will exclude uses and disclosures made for treatment, payment, or healthcare operations; disclosures made directly to you; disclosures you authorize; and disclosures to friends or family members involved in your care. The right to receive an accounting is subject to certain other exceptions, restrictions, and limitations. To request an accounting, you must submit a written request to the Company’s Privacy Officer at the Notice Address. Your request must specify the time period, but it cannot be longer than six years. The first accounting you request within a 12-month period will be provided free of charge; however, you may be charged for the cost of providing additional accountings. We will notify you of the cost, and you may choose to withdraw or modify your request at that time.
- **Confidential communications:** You have the right to request that we communicate with you about your health and related issues in a particular manner or at a certain location. For example, you may request that we contact you about medical matters only in writing, rather than by telephone, or at work, rather than at home. To request confidential communication of your PHI, you must submit a written request to the Company’s Privacy Officer at the Notice Address. Your request must state how or where you would like to be contacted, but you don’t need to provide a reason. We will accommodate all reasonable requests.

IV. Examples of How We May Use and Disclose PHI

The following are descriptions and examples of ways we will, or may, use and disclose your PHI. Please note that every specific use or disclosure is not listed below, but the different ways we are permitted to use and disclose your PHI fall within one of these categories.

- **We will use PHI for treatment:** Information obtained by the pharmacist will be used to dispense prescription medications to you. We may request information from the prescribing physician or another physician you refer us to. We will also document information related to the medications dispensed and services provided to you in your record.
- **We will use PHI for payment:** We will contact your insurer or pharmacy benefit manager to determine whether it will pay for your prescription and your co-payment amount. We will bill you or a third-party payer for the cost of prescription medications dispensed to you. The information on or accompanying the bill may include information that identifies you, as well as the prescriptions you are taking.

- We will use PHI for healthcare operations: We may use information in your health record to monitor the performance of our pharmacists, or to conduct cost-management and business planning activities. This information helps us improve the quality and effectiveness of the healthcare services and products we provide.
- Business associates: We may share your PHI with certain business associates that perform services for us under contract. Examples include companies we engage to administer prescription drug benefit programs, process health benefit claims and/or payments, process Medicare claims, or maintain computer systems that process such data or store PHI. When these services are contracted, we may disclose your PHI to a business associate so they can perform the job we've asked them to do and bill you or your third-party payer for services rendered. To protect your PHI, we require our business associates to appropriately safeguard the PHI.
- Health-related communications: We may use or disclose your PHI to communicate with you, by telephone or otherwise, about a product or service related to your treatment (such as prescriptions and refill reminders), or to help coordinate or manage your care, or to direct or recommend treatment alternatives, therapies, providers, settings of care, or other health-related benefits and services that may be of interest to you.
- Food and Drug Administration (FDA): We may disclose to the FDA, or persons under the jurisdiction of the FDA, PHI related to adverse events with respect to drugs, foods, supplements, products and product defects, or post-marketing surveillance information to enable product recalls, repairs, or replacement.
- Worker's compensation: We may disclose your PHI as authorized by, and as necessary to comply with, laws relating to worker's compensation or similar programs established by law.
- Public health: As required by law, we may disclose your PHI to public health or legal authorities charged with preventing or controlling disease, injury, or disability.
- Law enforcement: We may disclose your PHI for law enforcement purposes as required by law or in response to a valid subpoena or other legal process.
- As required by law: We must disclose your PHI when required to do so by law.
- Health oversight activities: We may disclose your PHI to an oversight agency for activities authorized by law. These oversight activities can include, for example, audits, investigations, and inspections, as necessary for our licensure and for the government to monitor government programs, compliance with civil rights laws, and the healthcare system in general.
- Judicial and administrative proceedings: If you are involved in a lawsuit or a dispute, we may disclose your PHI in response to a court or administrative order. We may also disclose your PHI in response to a subpoena, discovery request, or other lawful process by someone else involved in the dispute, but only if efforts have been made to tell you about the request or to obtain an order protecting the requested PHI.
- Coroners, medical examiners, and funeral directors: We may release your PHI to a coroner or medical examiner. This may be necessary, for example, to identify a deceased person or determine the cause of death. We may also disclose PHI to funeral directors consistent with applicable law to carry out their duties.
- Correctional institution: If you are or become an inmate of a correctional institution, we may disclose PHI to the institution or law enforcement officials when necessary to provide health services to you, for the safety and security of the institution, and/or to protect your health and safety or the health and safety of others.
- To avert a serious threat to health or safety: We may use and disclose your PHI when necessary to reduce or prevent a serious threat to your health and safety or the health and safety of the public or another person.

- **Military and veterans:** If you are a member of the armed forces, we may release your PHI as required by military command authorities. We may also release PHI about foreign military personnel to the appropriate military authority.
- **National security and intelligence activities:** We may release your PHI to authorized federal officials for intelligence, counterintelligence, and other national security activities authorized by law.
- **Protective services for the President and others:** We may disclose your PHI to authorized federal officials so they may provide protection to the President, other authorized persons or foreign heads of state, or to conduct special investigations.
- **Victims of abuse, neglect, or domestic violence:** We may disclose your PHI to a government authority, such as a social service or protective services agency, if we reasonably believe you are a victim of abuse, neglect, or domestic violence. We will only disclose this information to the extent required by law, if you agree to the disclosure, or if the disclosure is allowed by law and we believe it is necessary to prevent serious harm to you or someone else, and if the law enforcement or public official that is to receive the report represents that it is necessary and will not be used against you.

V. Authorization for Other Uses and Disclosures of PHI

We will obtain your written authorization before using or disclosing your PHI for purposes other than those provided for above or as otherwise permitted or required by law. Your authorization is specifically required for most uses or disclosures of PHI for marketing communications or for any sale of PHI that involves financial remuneration to the Company.

You may revoke an authorization in writing at any time. Upon receipt of the written revocation, we will stop using or disclosing your PHI, except to the extent that we have already taken action in reliance on the authorization. Please note that we may be required by applicable law to retain certain PHI about you, particularly regarding the provision of healthcare services and products.

VI. For More Information or to Report a Problem

If you have questions or would like additional information about Lewis Drugs, Inc. Pharmacy's privacy practices, you may contact the Company's Privacy Officer at 605-367-2800, kheer@lewisdrug.com or at the Notice Address. If you believe your privacy rights have been violated, you can file a written complaint with the Company's Privacy Officer at the Notice Address or with the Secretary of the federal Department of Health and Human Services. There will be no retaliation for filing a complaint.

Please note that standard email may not be a secure method for transmitting sensitive health information. For highly sensitive inquiries or to submit personal health information, we recommend calling or sending a written request to the Privacy Officer.

VII. Notice Address and Phone Number

Call 1-605-367-2800 or send all correspondence, requests, questions, and complaints related to the permitted or required uses and disclosure of your PHI by the Company and your rights with respect to your PHI to the following address (Notice Address) in written form:

Lewis Drugs, Inc. Attention: Kyle Heer, Privacy Officer 2701 S. Minnesota Ave., Sioux Falls, SD 57105

VIII. Effective Date

This Notice is effective as of September 1, 2013. This Notice is subject to periodic review and updates to ensure compliance with applicable laws and regulations. Last reviewed and updated June 3, 2025.