

## Notice of Privacy Practices

### 1. Scope, Application, Effective Date, & Purpose.

This Notice of Privacy Practices is effective as of March 10, 2019, and contemplates how R+K Wellness MD, LLC (d/b/a “Canna Therapy MD”), may use or disclose your Protected Health Information (“PHI”). If you are looking for the Privacy Policy governing use of our website, you may access it [here](#). We may change our Notice of Privacy Practices from time-to-time. Should we do so, this Notice of Privacy Practices will be promptly revised. Updated versions will be made available on this website, at our office, and upon request at the contact information below.

- a. **Contact.** We strongly encourage all of our website users and customers to come to us with any questions, comments, concerns, complaints, or topics for discussion. This is because we care about protecting your information and respecting your privacy. You may contact or submit a complaint to the Privacy Officer of R+K Wellness MD, LLC, at the information below:

Name: Matt Fowls

Email: [matt@mattfowls.com](mailto:matt@mattfowls.com)

Phone: 720.386.5546

### 2. Summary of this Notice of Privacy Practices.

- a. **Rights.** You have many rights when it comes to your PHI. You are able to:

- Obtain a copy of your PHI in the form of your medical records
- Ask us to communicate confidentially
- Complain if you believe your privacy rights have been infringed
- Appoint a representative to act on your behalf
- Obtain a copy of this Notice of Privacy Practices
- Request that any information we disclose about you be limited
- Amend your PHI where you believe our records are inaccurate
- See who we have shared your information with, if applicable
- Choose how we use and share information about you, including whether we are able to inform friends and family regarding your condition

- b. **Use & Disclosure of your information.** We do not sell, market, or lease your information. We collect PHI from you in the following ways:

- Through the information you voluntarily submit through our website
- By the intake process at our offices prior to your scheduled appointment
- During your scheduled appointment

We may use or disclose your PHI in the following ways:

- To evaluate whether medicinal cannabis is a potential option to help you manage a Qualifying Condition
- Conduct research
- Operate our Company
- Comply with the law & requests from law enforcement
- Mitigate an emergency
- Participate in lawsuits and legal actions in which we have an interest

- c. **Our Responsibilities.** We have the following responsibilities to you:

- We must provide you with a copy of this Notice of Privacy Practices
- We are required under law to keep your PHI private and secure
- We have to inform you where the security or privacy of your PHI has been compromised
- We must promptly revise this Notice of Privacy Practices and make it available where we materially change our privacy practices
- We may not share or disclose your PHI without your prior, written, informed, and express consent.

### 3. Notice of Privacy Practices

a. **Your Rights.** As highlighted above, you have a number of rights when it comes to your PHI. Each of those rights is elaborated on below.

- Obtain a copy of your PHI in the form of your medical records. You can always request that we provide you with copies of medical records about you we have in our possession. Please contact us at the information below, and we will promptly process your request. Typically requests are processed within thirty (30) days from receipt. We reserve the right to charge you a fee only for the purposes of processing your request.
- Ask us to communicate confidentially. Confidential communication is a hallmark of what we do. We never want you to feel scared or reluctant to talk to us. Please ask us to ensure the complete confidentiality of our communications.
- Complain if you believe your privacy rights have been infringed. Though we are 100% committed to keeping your PHI confidential, no security system is perfect. If you believe that your privacy rights have been compromised, please contact our Privacy Officer at:

Attn: Matt Fowls  
[matt@mattfowls.com](mailto:matt@mattfowls.com)  
 720.386.5546

You may also complain to the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting [www.hhs.gov/ocr/privacy/hipaa/complaints/](http://www.hhs.gov/ocr/privacy/hipaa/complaints/). We will not retaliate against you for filing a complaint.

- Appoint a representative to act on your behalf. You can legally designate someone else to make decisions for you, if you would like. We will confirm that who you designate does, in fact, have actual authority to act for you. You can expedite this process by bringing dispositive proof of your appointment, such as a notarized and signed power of attorney.
- Obtain a copy of this Notice of Privacy Practices. You may always obtain a copy of this Notice of Privacy Practices by accessing it through our website, emailing or calling us, or by requesting it at our Office.
- Request that any information we disclose about you be limited. You can always ask for us to refrain from using or disclosing your PHI, such as in the case of where we carry out research.
- Amend your PHI. If you believe the PHI we have on record is inaccurate, please feel free to let us know. We will be happy to change it. This may be done by submitting an email, telephone call, or inquiry to us at the contact information below.

viii. See who we have shared your information with, if applicable. You may request an accounting of all individuals and entities with whom we have shared your information. We will provide the first one free-of-charge. Thereafter, we reserve the right to charge you a reasonable processing fee. Your request will cover all records we have relating to the sharing of your information.

ix. Choose how we use and share information about you, including whether we are able to inform friends and family regarding your condition. Where your family or friends are involved in your care, you have the right to limit the information we share with them in our evaluation of you. *Where we have no reasonable means of communicating with you, such as where you are unconscious or exigent circumstances exist, we may share information reasonably necessary to mitigate the exigency.*

**b. Use & Disclosure of your information.** We do not sell, market, or lease your information, as we believe this does not contribute meaningfully to why we are in business. We also feel that using your information in this way might deter you from being open about your symptomology. We hope you will be candid with us during your appointment, and discuss what comes to mind regarding your symptomology and presentation.

We collect PHI from you in the following ways:

- ii. Through the information you voluntarily submit through our website. This occurs where you submit information to us during the course of scheduling your appointment. We will keep any information you submit to us while scheduling your appointment secure and confidential.
- iii. By the intake process at our offices prior to your scheduled appointment. Upon your arrival at our Office for evaluation, you will receive some paperwork. Inside this paperwork, you will likely be asked to discuss your medical history, current symptomology, and other information.
- iv. During your scheduled appointment. During your evaluation, you will likely discuss many issues relating to your health. These may include your current symptoms and past medical history.

We may use or disclose your PHI in the following ways:

- i. To evaluate whether medicinal cannabis is a potential option to help you manage a Qualifying Condition. This may include sharing with other health professionals who require it to carry out evaluation, diagnosis, and treatment.
- ii. Conduct research. Medicinal cannabis is an emerging way of managing certain medical conditions. This makes data and research of critical importance for developing understanding regarding novel modes of healthcare. We may undertake our own research using data we collect. This may include reporting adverse reactions to medicinal cannabis or related derivatives.
- iii. Operate our Company. We require the ability to contact you and tailor our evaluation of your health condition.
- iv. Comply with the law & requests made by law enforcement. We may share your information to comply with a state or federal law or court order. We may also disclose your information to report suspected domestic violence, abuse, neglect, or exploitation. There may also be times where the Department of Health and Human Services wants to see we comply with applicable privacy regulations; we will share information necessary to comply with their requests.
- v. Emergency mitigation. There may be times where disclosure of your information is required to prevent substantial harm to the health or safety of another. Should we have reason to believe that

the health or safety of another is at risk, we will disclose all information reasonably necessary to mitigate the risk of harm.

- vi. Participate in lawsuits and legal actions in which we have an interest. We may disclose or use your information to participate in a lawsuit in which we have an interest. This could include

**c. Our Responsibilities.** We have the following responsibilities to you:

- a. We must provide you with a copy of this Notice of Privacy Practices. You should never hesitate to ask for a copy of this Notice of Privacy Practices. You may do so by accessing a copy on our website, making a request personally at our office, or by sending an inquiry to the contact information below.
- b. We are required under law to keep your PHI private and secure. We strive to keep your information secure, safe, and private.
- c. We have to inform you where the security or privacy of your PHI has been compromised. Should we detect a breach or other compromise of your information, we will promptly inform you.
- d. We must promptly revise this Notice of Privacy Practices and make it available where we materially change our privacy practices. Any revisions will be made available on our website, upon request at our office, or through the contact information provided below.
- e. We may not share or disclose your PHI without your prior, written, informed, and express consent. You can always change your mind where you provide your consent. If you have previously provided your informed consent, please do not hesitate to reach out if you would rather not allow us to share your information.

**d. Contact.** We strongly encourage you to contact us with any questions, comments, concerns, complaints, or talking points at the information below. Our Privacy Officer may be reached at:

Name: Matt Fowls

Email: [matt@mattfowls.com](mailto:matt@mattfowls.com)

Phone: 720.386.5546