DEAR PATIENT,

Since 1878, Buderer Drug Company has assured the highest level of patient care through quality compounding processes. We team with physicians to promote better health by developing tailored treatments to achieve optimal therapeutic outcomes. Our pharmacists and technicians are highly specialized and diversified in their background to help meet patient needs which includes:

- Access to a clinically trained pharmacist during normal business hours
- Assistance with verifying insurance benefits and understanding your financial responsibility
- Coordination of prior authorization with your insurance company and prescriber’s office
- Therapy consultations with a clinically trained pharmacist
- Confidential and convenient packaging and shipping of prescriptions and over-the-counter medications

For questions, concerns, or for more information on the services we provide please:

Visit our website at www.budererdrug.com
Visit or call one of our locations (see page 3)
Email: info@budererdrug.com

We look forward to providing you with the best service possible. We know you have many options, and we thank you for choosing Buderer Drug as your compounding pharmacy.

Sincerely,
The Buderer Drug Team
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OUR LOCATIONS

Avon, Ohio
38530 Chester Road Ste. 400 Avon, OH 44011
Phone: 440.934.3100     Fax: 440.934.3103     Toll Free:
Email: avon@budererdrug.com
Hours: 9 am – 6 pm (M-F)

Perrysburg, Ohio
26611 N. Dixie Highway, Ste. 119 Perrysburg, OH 43551
Phone: 419.873.3800     Fax: 419.873.0494     Toll Free:
Email: perrysburg@budererdrug.com
Hours: 9 am – 6 pm (M-F)

Sandusky, Ohio
633 Hancock Street Sandusky, OH 44870
Phone: 419.627.2800     Fax: 419.626.0494     Toll Free:
Email: sandusky@budererdrug.com
Hours: 9 am – 6 pm (M-F)

Buderer Drug locations are closed in observance of the following holidays:
ACCESS INFORMATION

QUESTIONS ABOUT YOUR MEDICATIONS?

If you have questions or concerns regarding your medication(s), our pharmacists and technicians at Buderer Drug will be happy to assist you!

A licensed pharmacist is available for you during normal business hours via telephone or by visiting any of our locations.

You can also contact us via:

Email: info@budererdrug.com
Website: www.budererdrug.com
Mail: Location addresses on page 3
PRESCRIPTION PROCESSING

As part of the process to provide customized pharmacy care with compassion, education, and service of the highest quality, a Buderer Drug staff member will need to obtain your health history, provide education on how to take your medication(s), potential side effects, drug and/or food interactions, and any other concerns you may have regarding your medication throughout the prescription filling process. Our goal is to help you become aware of the effects your health care decision(s) may have on your daily life.

To make your medication regimen successful, we need your assistance! You must be willing to respond to our outreach calls to update us about changes to your demographics and health. Medications must be taken on-time and as instructed for you to receive the total benefit of your prescribed medication.

Buderer Drug knows it is critically important for you to understand your medication(s) and what it is being used for in order for you to have a successful medication regimen. We encourage you to reach out to us with any questions or concerns.

New Prescriptions:

New prescriptions are accepted through multiple formats that include:

- Your provider sending us the prescription directly
- Transferring from an outside pharmacy
- Providing the prescription personally by visiting a Buderer Drug location
- Mailing the paper prescription into one of our Buderer Drug locations

After we have received your prescription, a Buderer Drug team member will reach out to you to discuss insurance, shipping/pick-up options, prescription costs, provide drug information, and answer any questions you may have. During this process, the team member will obtain your address and demographics, your health and medication history, allergies and past sensitivities, and any other pertinent information necessary to ensure your prescribed medication(s) will be safe and effective for you.
Refills:

Please contact the pharmacy via phone, text, or mobile app when you are ready for a refill. For refills, please contact us for a refill at least 5 business days in advance of when you need your medication(s) so we can process your order.

Filling/Refilling Limitations:

Many insurance companies have different types of plans that may limit prescription filling and refilling. Buderer Drug will work with you on a case-by-case basis to resolve these limitations. Listed below are some common limitation and what they mean:

**Prior Authorization:** The medication prescribed by your provider is not covered under your insurance plan without supporting information from your provider’s office. Upon notification that the prescribed medication will need a prior authorization, a Buderer Drug team member will contact you. Buderer Drug will work with your provider’s office to obtain this authorization, and we will keep you updated throughout the process.

**Quantity Limits:** The medication prescribed by your provider is written for a certain amount of medication, however it is more than what your insurance will cover. This could be the number of times of use per day or the number of months of medication you can receive at once. For example: your prescriber writes your medication to be a 90-day supply, but your insurance will only cover a 30-day supply. Buderer Drug will answer any of your questions or concerns.

**Refill-Too-Soon:** The medication prescribed by your provider is written for a certain days supply, and you are trying to refill the medication sooner than your insurance company will approve. Most insurances will allow you to refill your medication(s) once a certain number of days have passed since your last prescription fill. This limitation is based off the anticipated amount of days your medications should last. If you reach out to us for a refill and it is too soon, a Buderer Drug team member will let you know of the limit and the next refillable date the insurance will approve. Certain situations may warrant an early refill, such as your prescriber increasing your dose, going on vacation, having medication stolen, or misplacing your medication. Buderer Drug will assist you in getting an early refill approved.
PRODUCT SELECTION

Compounded Medications:
Your health care provider will determine when to prescribe a compounded medication for you. All prescriptions that require compounding will be compounded as directed by your provider.

Commercially Available Medications:
Unless otherwise indicated, all prescriptions will be filled with an FDA-approved generic drug when available. Pharmacists will substitute a less expensive generically equivalent drug for a brand name drug, unless you or your provider direct otherwise. Additionally, substitution of medications may be required due to your insurance company preferring the generic medication(s) or to reduce your co-pay. A Buderer Drug will contact you to let you know of any substitutions before filling, billing, and shipping your medication.

If a prescribed medication is not available to be compounded and/or dispensed from Buderer Drug, a pharmacist may contact your provider to discuss alternative medication(s) or assist you in getting your medications from another pharmacy.
**Prescription Transfers:**

Buderer Drug is pleased to accept transfers of your prescriptions from another pharmacy. If you need to transfer your prescription to another pharmacy because your coverage has been changed or for any other reason, you can contact the Buderer Drug location that is filling your prescription(s) and a pharmacist will assist you with the transfer process.

**Shipping:**

Buderer Drug offers a variety of shipping options for your convenience. All medications that require refrigeration will be shipped overnight via FedEx. All medications that require storage within a freezer will be shipped overnight via FedEx. All non-refrigerated medications are shipped USPS First Class/Priority Mail. If a “rush” has been put on the prescription, we will expedite the shipping. Please note shipping times are dependent on the type of shipping selected, your geographical location, and holidays. Tracking numbers are available upon request.

**Order Status/Delays:**

If there is a delay in filling your prescription, a Buderer Drug team member will contact you to notify you of the delay. Buderer Drug will make every effort to prevent interruptions in your medication therapy. If our pharmacy is unable to provide your medication, we will help you in getting your medication from another pharmacy.

Buderer Drug’s team is continually monitoring weather conditions where you live to anticipate possible delays that may affect your medication regimen. This includes: extreme weather, expected delivery delays, or disasters. If there is an emergency or disaster at your location or ours, Buderer Drug will work with you to avoid interruptions in therapy which may include:

- Holding your order until conditions have improved
- Expediting your shipping
- Transferring your prescription(s) to a different pharmacy
- Shipping your prescriptions(s) to an alternative address
- Replacing your damaged medication(s) which may have been compromised
FINANCIAL OBLIGATIONS & INSURANCE INFORMATION

Insurance Claims:
Buderer Drug will process prescription claims to your health insurance carrier. Please notify Buderer Drug of any changes to your billing address or insurance information. If the prescription claim is rejected, a Buderer Drug team member will advise you so we can work together to resolve the issue. You may be responsible for paying a co-pay, coinsurance and/or deductible amount. Buderer Drug does not typically have specific information regarding your health benefits. For further information on your financial obligations, please contact your insurance carrier.

Co-Payments:
Due to federal laws and regulations, and contractual agreements between Buderer Drug and most insurance carriers, Buderer Drug is required to collect all co-payments prior to the dispensing of your prescription medication(s). Buderer Drug accepts all major credit cards, as well as, cash or check.

Out of Network:
In the event Buderer Drug is deemed “Out of Network” by your insurance carrier, we will inform you of the cost charged by Buderer Drug for your medication(s). Buderer Drug will work with your insurance carrier to become “In Network.” Please understand this process takes time and is not always possible due to contractual issues. A team member will follow-up with you to let you know the outcome as soon as possible. You may also request a universal claim form from the pharmacy for compounded medications if Buderer Drug is deemed “Out of Network.” This form, when submitted to your insurance carrier, may allow you the possibility to be partially/fully reimbursed by your insurance carrier.

Note:
- Your credit card will NEVER be charged without your explicit consent and authorization.
- We do not accept prescription discount cards.
SAFETY INFORMATION

Adverse Effects to Medication:
Adverse effects are occurrences that are inconsistent with/or contrary to the expected outcomes of the medication. If you feel you are experiencing an adverse drug reaction, or acute medical condition please contact your physician and/or Buderer Drug immediately. If you are having a medical emergency please go to your nearest emergency room or dial 9-1-1.

Drug Recalls:
A drug recall occurs when a prescription or over-the-counter medicine is removed from the market because it is found to be either defective or potentially harmful. Buderer Drug follows drug recall guidelines created by the Food and Drug Administration (FDA), drug manufacturers, distributors, and/or state and federal regulatory agencies. We will contact you and your provider if there is an FDA Class 1 recall. For lesser recalls, the pharmacy will contact you, your prescriber, or your health plan accordingly. A pharmacist will work with your health care provider to recommend an alternative medicine to use during the recall and discuss the alternative medication with you. If the pharmacy contacts you about a medicine you are taking that has been recalled:
- Stop taking the medication immediately
- Discard it safely

Concerns/Suspected Errors:
Buderer Drug strives to provide you with the highest level of customer care. If you have any concerns about the medication(s) you have received from Buderer Drug or suspect an error, please contact us immediately to address the concern.

Any concerns or suspected errors Buderer Drug received will be thoroughly reviewed by management. Immediate steps will be taken if further action is needed.
HAZARDOUS MEDICATION INFORMATION

HANDLING HAZARDOUS MEDICATIONS SAFELY AT HOME

This information provided gives guidance on handling, storing, and disposing of your medications safely at home, in conjunction with any instruction, and counseling provided by our pharmacists.

If you have any questions concerning your medication, please contact a pharmacist at one of our locations.

Handling Your Medication:
- Wash your hands before and after handling your medication.
- Wear disposable gloves if applying medications such as creams or gels to the skin.
- Discard used gloves, medicine cups, and/or oral or topical syringes by placing them in a plastic bag. Tie or seal the bag and place in your household trash bag for disposal. Do not reuse these items.

Storing Your Medications:
- Your pharmacist will tell you if there are any special storage instructions regarding your medication.
- Keep all medications out of the reach of children and pets.
- Always store your medication in their original containers.
- If your medication needs to be refrigerated, place it in a separate area in your refrigerator away from food.
- Do not store medications in areas of high moisture such as bathrooms.

Disposing of Your Medication and Medication Containers:
- If you have a local pharmacy or facility that has a drug take-back program, it is recommended that you utilize their program for disposal of unused medications.
- If not, to dispose of your unused medications:
  o DO NOT flush medications down the toilet.
  o Wear disposable gloves and take the medication out of its original container.
  o Mix the drugs with an undesirable substance such as cat litter or used coffee grounds.
  o Put the mixture into a disposable container with a lid such as an empty plastic container.
  o Black out or remove any personal information from your container.
  o Seal the container and place the contents into the trash.
CONSUMER RIGHTS & RESPONSIBILITIES

Buderer Drug recognizes that patients have inherent rights. Patients and their families also have responsibilities while under the care of Buderer Drug in order to facilitate the provision of safe, high-quality health care for themselves and others. Patients who feel their rights have not been respected, or who have questions or concerns, should speak to the Pharmacy Manager.

Consumer Rights:

- To select who provides you with pharmacy services.
- To receive the appropriate or prescribed services in a professional manner without discrimination relative to age, sex, race, religion, ethnic origin, sexual preference, or physical or mental disability.
- To be treated with friendliness, courtesy, and respect by each and every individual representing our pharmacy who provides treatment or services for you and be free from neglect or abuse.
- To be provided with adequate information from which you can give your consent for commencement of services, the continuation of services, the transfer of services to another health care provider, or the termination of services.
- To express concerns, grievances, or recommend modifications to your pharmacy services, without fear of reprisal.
- To request and receive complete and up to date information relative to your condition, treatment, alternative treatments, risk of treatment, or care plans.
- To receive treatment and services within the scope of your plan of care, promptly and professionally, while being fully informed of our pharmacy’s policies, procedures, and charges.
- To request and receive data regarding treatment, services, or costs, privately and confidentially.
- To be given information as it relates to the uses and disclosure of your plan of care.
- To have your place of care remain private and confidential, except as required and permitted by law.
- To receive instruction on handling a drug recall.
- To receive pharmacy health and safety information that includes consumer’s rights and responsibilities.
Consumer Responsibilities:

- To provide accurate and complete information regarding your past and present medical history.
- To participate in the development and updating of a plan of care.
- To communicate whether you clearly comprehend the course of treatment and plan of care.
- To comply with the plan of care and clinical instructions.
- To accept responsibility for your actions, if refusing treatment or not complying with the prescribed treatment and services.
- To respect the rights of Buderer Drug's personnel.
- To notify your health care provider and Buderer Drug with any potential side effects and/or complications.
- To notify Buderer Drug when your medication supply is running low so a refill may be provided in a timely manner to you.
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.

Buderer Drug will ask you to sign an acknowledgement that you have received this Notice of Privacy Practices. This Notice describes how Buderer Drug may use and disclose your protected health information in accordance with the HIPAA Privacy Rule. It also describes your rights and Buderer Drug’s duties with respect to protected health information about you.

Section A: Uses and Disclosures of Protected Health Information

1. Treatment, Payment, and Health Care Operations

   a. We will use your health information to provide treatment. This may involve receiving or sharing information with other health care providers such as your physician. This information may be written, verbal, electronic, or via fax. This will include received prescription orders so that we may dispense prescription medications. We may also contact you to provide treatment-related services, such as treatment alternatives and other health related services that may be of benefit to you.

   b. We will use your health information to obtain payment. This will include sending claims for payment to your insurance or third-party payer. It may also include providing health information to the payer to resolve issues of claim coverage.

   c. We will use your health information for our health care operations necessary to run the pharmacy. This may include monitoring the quality of care our employees provide to you and for training purposes.

2. Permitted or Required Uses and Disclosures

   a. Our pharmacists, using their professional judgement, may disclose your protected health information to a family member, other relative, close friend, or any other person you identify as being involved in your health care. This includes allowing such persons to pick-up filled prescriptions, medical supplies, or medical records on your behalf.

   b. We also have contracts with entities called Business Associates that perform some services for us that require access to your protected health information. Examples include: companies that route claims to your insurance company or that reconcile the payments we receive from your insurance. We require Business Associates to safeguard and protect health information appropriately.

   c. Under certain circumstances, Buderer Drug may be required to disclose health information as required or permitted by federal or state laws. These include, but are not limited to:
1. The Food and Drug Administration (FDA) relating to adverse events regarding drugs, foods, supplements, and other health products, or for post-marketing surveillance to enable product recalls, repairs, or replacement.

2. To the public health or legal authorities charged with preventing or controlling disease, injury, or disability.

3. To law enforcement agencies as required by law or in response to a valid subpoena or other legal process.

4. To health oversight agencies (e.g. licensing boards) for activities authorized by law such as audits, investigations, and inspections necessary for Buderer Drug licensure and for monitoring of health care systems.

5. In response to a court order, administrative order, subpoena, discovery request or other lawful process by another person involved in a dispute involving a patient, but only if efforts have been made to tell the patient about the request or to obtain an order protecting the requested health information.

6. As authorized by and as necessary to comply with laws relating to worker’s compensation or similar programs established by law.

7. Whenever required to do so by law.

8. To a Coroner or Medical Examiner when necessary. Examples include: identifying a deceased person or to determine a cause of death.

9. To Funeral Directors to carry out their duties.

10. To organ procurement organizations or other entities engaged in procurements, banking, transplantation, or organs for the purpose of tissue donation and transplant.

11. To notify or assist in notifying a family member, personal representative, or another person responsible for the patient’s care, the patient’s location, or general condition.

12. To a correctional institution or its agents if a patient is or becomes an inmate of such an institution when necessary for the patient’s health or the health and safety of others.

13. When necessary to prevent a serious threat to the patient’s health and safety or the health and safety of the public or another person.

14. As required by military command authorities when the patient is a member of the armed forces and to appropriate military authority about foreign military personnel.

15. To authorized officials for intelligence, counterintelligence, and other national security activities authorized by law.

16. 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.

17. To a government authority, such as a social service or protective service agency. If Buderer Drug reasonably believes the patient to be a victim of abuse, neglect, or domestic
violence, but only to the extent required by law. If the patient agrees to the disclosure or if the disclosure is allowed by law and we believe it is necessary to prevent serious harm to the patient, to someone else, the law enforcement, or public official that is to receive the report represents that it is necessary and will not be used against the patient.

3. **Authorized Use and Disclosure**

   a. Use or disclosure other than those previously listed or as permitted or required by law, will not be made unless we obtain your written authorization in advance. You may revoke any such authorization in writing at any time. Upon receipt of a revocation, we will cease any such authorization in writing at any time. Upon receipt of revocation, we will cease using or disclosing protected health information about you unless we have already taken action based on your authorization.

4. **More Stringent Laws**

   a. Some states may have laws that are more stringent than HIPAA. Please refer to the end of the Notice of laws that may apply.

**Section B: Patient’s Rights**

1. **Restriction Requests**

   a. You have a right to request a restriction be placed on the use and disclosure of your protected health information for purposes of carrying out treatment, payment or health care operations. Restrictions may include requests for not submitting claims to your insurance or third-party payer or limitations on which persons may be considered personal representatives.

   b. Buderer Drug is not required to accept restrictions other than payment related uses not required by law that have been paid in full by the individual or representative other than a health plan.

   c. If we do agree to requested restrictions, they shall be binding until you request that they be terminated.

2. **Alternative Means of Communication**

   a. You have the right to receive confidential communications of protected health information by alternate methods or at alternate locations upon reasonable request. Examples of alternatives may be sending information to a phone or mailing address other than your home.

   b. Buderer Drug shall make reasonable accommodations to honor requests.

3. **Access to Health Information**

   a. You have the right to inspect and copy your protected health information. The designated record set will usually include prescription and billing records. You have the right to request the protected health information in the designated record set as long as we maintain your records.

   b. You have the right to request that your protected health information be provided to you in an electronic format if available.
4. **Amendments to Health Information**

a. If you believe that your protected health information is incomplete or incorrect, you may request an amendment to your records. You may request amendment to any records for as long as we maintain your records.

b. Requests must include a reason that supports the amendment to your health information.

c. Buderer Drug may deny amendment requests in certain cases. In case of denial, you have the right to submit a Statement of Disagreement. We have the right to provide a rebuttal to your statement.

5. **Accounting of Uses and Disclosures**

a. You have the right to request an accounting of uses and disclosures that are not for treatment, payment, or health operations. This accounting may include up to six years prior to the date of request and will not include an accounting of disclosures to yourself, your personal representatives, or anything authorized by you in writing. Other restrictions may apply as required in the Privacy Rule.

b. The first accounting in any 12-month period will be provided to you at no cost.

6. **Notice of Privacy Practices**

a. You have the right to receive a paper copy of this Notice even if you previously agreed to receive a copy electronically.

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**Section C: Buderer Drug’s Duties**

Buderer Drug is required by law to maintain the privacy protected health information to provide individuals with notice of its legal duties and privacy practices with respect to protected health information, and to notify affected individuals following a breach of unsecured protected health information.

Buderer Drug is required to abide by the terms of this Notice. We reserve the right to change the terms of this Notice and to make the new notice provisions effective for all protected health information that we maintain. Any such revised Notice will be made available upon request.
Section D: Contacting Us

1. **Additional Questions, Submitting Requests, or Complaints**

   a. If you have questions about this Notice or how Buderer Drug uses and discloses your protected health information please contact one of our pharmacy locations and speak to a pharmacy manager.

   b. You may obtain forms needed for request submission from all of our pharmacy locations.

   c. If you believe your privacy rights have been violated you may file a complaint with our owner Matt Buderer or with the Secretary of Health and Human Services. You will not be retaliated against for filing a complaint.

2. **Owner/Chief Pharmacist**

   Matt Buderer

   Buderer Drug Company

   26611 N. Dixie Highway Ste.119 Perrysburg, OH 43551

   Phone: 419.873.2800

3. **Secretary of Health and Human Services, Office of Civil Rights**

   a. For online complaint forms contact information for the Regional OCR offices:

      - [http://www.hhs.gov/ocr/privacy/index.html](http://www.hhs.gov/ocr/privacy/index.html)

   b. Email: OCRComplaint@hhs.gov for assistance or questions about complaint forms.
COMPLAINT FORM

Buderer Drug take complaints very seriously. If for any reason you are unsatisfied with the services or care you received you may contact us at any of the numbers listed in your welcome packet or complete this form and return it to us. We will do everything we can to make it right.

Type of Complaint (please circle):
- Incorrect Drug/Form
- Incorrect Strength/Does/Quantity
- Incorrect Prep
- Expired Product
- Shipping Damage/Error
- Customer Service Issue
- Incorrect Label/Directions
- Supplies
- Container
- Injury to Patient/Staff
- Delivery
- Billing Concern
- Other: ____________________________________________________________

Complaint Description:
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________

Name (optional): _________________________________________ Date: _____________

Preferred Contact Method (optional): ____________________________

Please return this form via email to our Corporate Office located at:
633 Hancock St. Sandusky, OH 44870
OR
Email:
info@budererdrug.com