

Notice of Privacy Practices

THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

We are committed to protecting the confidentiality of your health information, and are required by law to do so. This notice describes how we may use your health information within Mom's Meals, a PurFoods Company, and how we may disclose it to others outside Mom's Meals. This notice also describes the rights you have concerning your own health information. This Notice of Privacy Practices applies to all Mom's Meals' facilities and all personnel. This notice takes effect October 15, 2015, and remains in effect until we replace it.

Please review it carefully and let us know if you have questions.

Our Responsibilities

We are required by law to maintain the privacy and security of your protected health information.

We will notify you know promptly if a breach occurs that may have compromised the privacy or security of your information.

We must follow the privacy practices described in this notice and give you a copy of it.

We will not use or share your information other than as described here unless you tell us we can in writing - you may change your mind at any time. Let us know in writing if you change your mind by contacting our Privacy Officer – contact information is at the end of this notice.

Your Choices

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, contact us. Tell us what you want us to do, and we will follow your instructions.

In these cases, you have both the right and choice to tell us to:

- Share information with your family or others involved in your care
- Share information in a disaster relief situation

In the following cases we never share your information unless you give us written permission:

- Marketing purposes

Our Uses and Disclosures

How do we typically use or share your health information?

We typically use or share your health information in the following ways:

- Business Operations
- We use and disclose your information to run our organization and to contact you when necessary.
- Example: We use information about you to notify you of upcoming meal deliveries and remind you to order meals.
- Example: We use information about you to conduct internal quality improvement activities.
- Example: We use information about you to bill an agency for the service we provided to you.

External Audits

We use and disclose your information if it is necessary to respond to an agency or governmental audit.

How else can we use or disclose your health information?

We are allowed or required to disclose your information in other ways – usually in ways that contribute to the public good. We have to abide by conditions in the law before we can share your information for such purposes.

In all cases, including those listed below, if we have substance use disorder patient records about you, subject to 42 CFR part 2, we cannot use or share information in those records in civil, criminal, administrative, or legislative investigations or proceedings against you without (1) your consent or (2) a court order and a subpoena.

Public health and safety issues

We can disclose health information about you for certain situations such as:

- Product recalls
- Reporting suspected abuse, neglect, or domestic violence
- Comply with the law - We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it audits us to verify that we're complying with federal privacy law.
- Address workers' compensation, law enforcement, and other government requests

We can use or share health information about you:

- For workers' compensation claims
- For law enforcement purposes or with a law enforcement official
- With health oversight agencies for activities authorized by law
- Respond to lawsuits and legal actions
- We can share health information about you in response to a court or administrative order, or in response to a subpoena

To the extent that we have your substance use disorder patient records, subject to 42 CFR part 2, we will not share that information for investigations or legal proceedings against you without (1)

your written consent or (2) a court order and a subpoena.

Your Rights

When it comes to your health information, you have certain rights. This section explains your rights and some of our responsibilities.

- Get a copy of your health information
- You can ask to see or get a copy of the health information we have about you.
- We will provide a copy or a summary of your health information, usually within 30 days of your request.
- Ask us to correct health information - You can ask us to correct your health information if you think it is incorrect or incomplete. Ask us how to do this.

We may be unable to fulfil your request and if so, we will explain why in writing in a timely manner.

Request confidential communications

You can ask us to contact you in a specific way (for example, home or cell phone) or to send mail to a different address.

- We will consider all reasonable requests, and must say “yes” if you tell us you would be in danger if we do not.
- Ask us to limit what we use or disclose
- You can ask us not to use or disclose certain health information for treatment, payment, or our operations.
- We may be unable to fulfil your request and if so, we will notify you in a timely manner.

Get a list of those with whom we’ve shared information

You can ask for a list (accounting) of the dates on which we’ve disclosed your health information for the six years immediately preceding the date you ask, who we disclosed it to, and why.

We will include all disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We’ll provide one free accounting a year but may charge a reasonable, cost-based fee if you ask for another one within 12 months.

Get a copy of this privacy notice

You can ask for a copy of this notice at any time, even if you have agreed to receive the notice electronically. We will promptly provide you with a paper copy.

Choose someone to act for you

If you have given someone health power of attorney, or if someone is your legal guardian, that person can exercise your rights and make choices about your health information.

We will verify that any person who contacts us has the authority to act on your behalf before we take any action.

File a complaint if you feel your rights are violated

If you feel we have violated your rights you can complain by contacting our Privacy Officer – the contact information is below.

- You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by:
- Sending a letter or filing an online complaint to the appropriate Office of Civil Rights Regional Office – information can be found at www.hhs.gov/hipaa/filing-a-complaint; or
- Calling 1-800-368-1019 for further information

We will not retaliate against you for filing a complaint.

Changes to the Terms of this Notice

From time to time, we may change the terms of this notice, and the changes will apply to all information we have about you. If we do, the new notice will be on our website and available upon request. You can request a copy of our current Notice of Privacy Practices at any time by contacting our Privacy Officer.

Privacy Officer Contact Information

If you have any questions about this notice, or have further questions about how Mom's Meals may use or disclose your health information, please contact:

- Privacy Officer
- 3210 SE Corporate Woods Drive Ankeny, Iowa 50021
- 1-844-657-8714
- compliance@momsmeals.com

Revised 02/16/2026

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