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**Effective Date: June 23, 2018**

**VERFID NOTICE OF PRIVACY PRACTICES (NPP)**

**THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED.**

VERFID is in the business of collecting, storing, displaying, certifying, and verifying information regarding animals, service animals, emotional support animals, comfort animals, assistance animals, pets and their owners through the use of a website, mobile application, and RFID technology. Thus, you may voluntarily provide Health Care Provider notes in regards to your need for an emotional support animal, comfort animal, or an assistance animal. VERFID does not expect Health Care Provider notes to contain specific diagnoses, medications, treatment plans, laboratory values, imaging studies, or information regarding future appointments. VERFID expects notes to contain the minimum amount of information to demonstrate need for an emotional support animal, comfort animal, or an assistance animal. This information is a statement of need for the animal, and a statement that you have a disability recognized in the up-to-date Diagnostic and Statistical Manual of Mental Disorders (DSM). Your note which contains this information should be written on letterhead, with the date issued, and contain the name of the health care provider who wrote the note, their license number, the state of issue of their license, and the health care provider's signature.

**OUR PLEDGE REGARDING YOUR HEALTH INFORMATION**

VERFID is committed to protecting your personal and health information. All efforts will be made to protect your information from improper disclosure or misuse. We are required by law to maintain the privacy of your Protected Health Information, provide you information about our legal duties and privacy practices, inform you of your rights and the ways in which we may use Protected Health Information and disclose it to other entities and persons.

**HOW WE MAY USE AND DISCLOSE HEALTH INFORMATION ABOUT YOU**

Once your health information is reviewed and verified it will be maintained offline in encrypted removable media storage. For VERFID business purposes the output of this information is minimized utilizing a binary system. The output, which occurs when your RFID is scanned by the mobile phone application, will display that you have or you don't have a valid Health Care Provider note in support of your need for an emotional support animal, comfort animal, or an assistance animal. When your RFID is scanned by the mobile phone application it will never display information regarding your specific diagnoses, treatment plans, laboratory values, imaging studies, or information regarding future appointments. In addition, your Health Care Provider's name, license name, state of licensure,

taxonomy, or name of practice will never be displayed. At no time will your Health Care Provider note be forwarded to a participating business, displayed for public viewing, or be electronically attached to your customer account. In addition, at no time will an employee discuss your personal or health information with an individual outside of VERFID, and at no time will an employee discuss your personal or health information with an employee of VERFID if it doesn't relate to the successful execution of their VERFID responsibilities.

For lawsuits and other legal proceedings we may disclose Protected Health Information to courts, attorneys and court employees in the course of conservatorship, writs and certain other judicial or administrative proceedings. We may also disclose Protected Health Information about you in response to a court or administrative order, or in response to a subpoena, discovery request, warrant, or other lawful process.

### **OTHER USES AND DISCLOSURES OF HEALTH INFORMATION**

Other uses and disclosures of Health Information not covered by this NPP will be made only with your written authorization. If you authorize us to use or disclose your Health Information, you may revoke that authorization, in writing, at any time. However, the revocation will not be effective for information that we have already used and disclosed in reliance on the authorization.

### **YOUR RIGHTS REGARDING YOUR HEALTH INFORMATION**

You have the right to request a limit on the Health Information we disclose about you. To request a restriction, you must make your request in writing to [brandon.heeger@verfidservices.com](mailto:brandon.heeger@verfidservices.com). In your request, you must tell us (1) what information you want to limit; (2) whether you want to limit our use, disclosure or both; and (3) to whom you want the limits to apply. Our agreement must be in writing.

You have the right to request that we communicate with you about your Health Information in a certain way or at a certain location. For example, you may ask that we contact you only at home or only by mail. To request confidential medical communications, you must make your request in writing to [brandon.heeger@verfidservices.com](mailto:brandon.heeger@verfidservices.com). We will accommodate all reasonable requests. Your request must specify how or where you wish to be contacted.

You have the right to a paper copy of this NPP. You may ask us to give you a copy of this NPP at any time. Even if you have agreed to receive this NPP electronically, you are still entitled to a paper copy of this NPP. A copy of this NPP may be obtained at [www.verfidservices.com](http://www.verfidservices.com).

You have a right to be notified of a breach. You have the right to be notified if we or one of our Business Associates discovers a breach of unsecured Protected Health information about you.

### **CHANGES TO VERFID'S PRIVACY PRACTICES AND THIS NOTICE**

We reserve the right to change the VERFID privacy practices and this Notice. We reserve the right to make the revised or changed NPP effective for Protective Health Information we already have about you

as well as any information we receive in the future. We will post a copy of the current NPP on our company's website. In addition, at any time you may request a copy of the current NPP in effect.

**QUESTIONS OR COMPLAINTS**

If you have any questions about this NPP, please contact the VERFID Privacy and Security Officer at [brandon.heeger@verfidservices.com](mailto:brandon.heeger@verfidservices.com). If you believe your privacy rights have been violated, you may file a complaint with VERFID or with the Secretary of the Department of Health and Human Services, Office for Civil Rights. You will not be penalized for filing a complaint.