



HOLISTIC HEALTH  
CONCIERGE

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## Holistic Health Concierge Notice of Privacy Practices

This Notice of Privacy Practices explains how health information about you may be used and disclosed and how you can access this information.

Please review it carefully.

### **Our Commitment to Protecting Your Information**

Holistic Health Concierge is committed to protecting the privacy and security of your protected health information (PHI).

Protected health information includes information that identifies you and relates to your healthcare, services provided, or payment for healthcare services.

We are required by applicable privacy laws to maintain the privacy of your health information, provide this Notice explaining our privacy practices, and follow the terms of this Notice.

### **How We May Use and Disclose Your Health Information**

Holistic Health Concierge may use or disclose your health information as permitted by law for the following purposes:

#### Treatment

We may use and share your health information to provide, coordinate, or manage your healthcare services.

Examples may include:

- Reviewing your health history
- Documenting services provided
- Coordinating care with other healthcare providers when needed

#### Payment

We may use your information for payment-related activities associated with services provided.

Examples may include:

- Processing payments
- Providing receipts or service documentation

#### Healthcare Operations

We may use information to support business and healthcare operations.

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Boca Raton, Florida 33433

Phone: 561.462.1679 | Fax 561.621.8289



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Examples may include:

- Quality review activities
- Compliance activities
- Maintaining and improving services

#### Other Uses and Disclosures Permitted or Required by Law

We may use or disclose your health information when permitted or required by law.

Examples may include:

- Responding to legal or regulatory requirements
- Reporting certain public health or safety concerns
- Cooperating with oversight activities when required
- Preventing serious threats to health or safety

#### Uses Requiring Your Authorization

Certain uses and disclosures of your health information require your written authorization. If you authorize Holistic Health Concierge to use or disclose your information, you may revoke that authorization in writing as permitted by law.

Examples may include:

- Releasing information to certain individuals or organizations at your request
- Uses or disclosures not otherwise permitted by HIPAA without authorization

### **Your Privacy Rights**

You have rights regarding your protected health information.

These rights include:

*Right to Access Your Records* - You may request access to inspect or receive a copy of your health information.

*Right to Request an Amendment* - You may request a correction if you believe information in your record is incorrect or incomplete.

*Right to Request Restrictions* - You may request limitations on certain uses or disclosures of your information.

*Right to Request Confidential Communications* - You may request that we communicate with you using a specific method or location when reasonable.

*Right to Receive an Accounting of Disclosures* - You may request information regarding certain disclosures of your health information.

*Right to Receive a Copy of this Notice* - You may request a paper or electronic copy of this Notice at any time.

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### **Protecting Your Information**

Holistic Health Concierge maintains safeguards designed to protect your health information.

These safeguards include processes related to:

- Protecting patient records
- Limiting access to appropriate individuals
- Maintaining secure systems used for patient information
- Reviewing privacy and security practices

### **Questions or Privacy Concerns**

If you have questions about this Notice or concerns regarding your privacy rights, please contact:

Privacy Contact:

Name:

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Phone:

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Email:

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You may also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights.

You will not be retaliated against for filing a privacy complaint.

### **Changes to this Notice**

Holistic Health Concierge may update this Notice as privacy practices or legal requirements change.

The current Notice will be made available upon request and through applicable patient communication resources.

Effective Date: Thursday, June 25, 2026