NOTICE OF PRIVACY PRACTICES

Effective Date: 7-25-2026

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

OUR COMMITMENT TO YOUR PRIVACY

Palm Breeze Pediatrics LLC ("Palm Breeze Pediatrics," "we," "our," or "us") is committed to protecting the privacy and security of your health information.

This Notice explains how we may use and disclose your protected health information ("PHI"), your rights regarding that information, and our responsibilities under the Health Insurance Portability and Accountability Act ("HIPAA") and other applicable laws. Because we provide pediatric care, references to "you" may include a parent, legal guardian, or other legally authorized representative when permitted by law. We are required to protect the privacy and security of your PHI, provide you with this Notice, notify you following certain breaches of unsecured PHI, and follow the Notice currently in effect.

HOW WE MAY USE AND DISCLOSE YOUR INFORMATION

We may use or disclose your PHI without separate written authorization when permitted or required by law, including for:

Treatment: To provide and coordinate your care, including telehealth evaluations, prescriptions, laboratory orders, referrals, follow-up care, and communication with other health care professionals involved in your care.

Payment: To process payments, administer membership or self-pay arrangements, maintain billing records, and perform other payment-related activities.

Health Care Operations: To operate Palm Breeze Pediatrics, including quality improvement, provider evaluation, credentialing, compliance, auditing, patient support, business administration, legal services, and technology management.

We may also use or disclose PHI when permitted or required for:

- Appointment reminders and communications related to your care;
- Communication with parents, guardians, caregivers, or others involved in your care when permitted by law;
- Public health and disease-reporting activities;
- Reporting suspected abuse or neglect;
- Health oversight and regulatory activities;
- Judicial or administrative proceedings;
- Certain law-enforcement purposes;
- Preventing or reducing a serious threat to health or safety;
- Workers' compensation or other legally authorized programs;
- Coroners, medical examiners, organ donation, or other purposes authorized by law; and
- Other situations in which disclosure is required or permitted by federal or state law.

BUSINESS ASSOCIATES

We may share PHI with companies that perform services for Palm Breeze Pediatrics, such as electronic health record providers, telehealth platforms, payment processors, technology providers, laboratories, communications vendors, attorneys, and other service providers. When required by HIPAA, these organizations must appropriately safeguard PHI and enter into agreements requiring them to protect the information.

USES REQUIRING YOUR AUTHORIZATION

We will obtain your written authorization before using or disclosing PHI when authorization is required by law. This may include certain uses or disclosures involving psychotherapy notes, marketing, the sale of PHI, or other activities requiring specific authorization. You generally may revoke an authorization in writing at any time. A revocation will not affect actions we already took based on a valid authorization. Certain categories of health information may receive additional privacy protections under federal or state law. We will comply with applicable requirements governing specially protected information.

YOUR PRIVACY RIGHTS

Subject to applicable law, you have the right to:

- **Access your records.** You may request to inspect or obtain a copy of your medical and billing records.
- **Request corrections.** You may ask us to amend information you believe is incorrect or incomplete. We may deny the request when permitted by law.
- **Request restrictions.** You may ask us to limit certain uses or disclosures of your PHI. We are not required to agree to every request, except in certain circumstances required by law.
- **Request confidential communications.** You may ask us to contact you through a particular method or at a particular location.
- **Request an accounting of disclosures.** You may request information about certain disclosures we have made of your PHI.
- **Receive a copy of this Notice.** You may request a paper or electronic copy at any time.
- **Receive breach notification.** We will notify you following a breach of unsecured PHI when notification is required by law.
- **File a complaint.** You may complain to Palm Breeze Pediatrics or the U.S. Department of Health and Human Services if you believe your privacy rights have been violated.

Palm Breeze Pediatrics will not retaliate against you for exercising your privacy rights or filing a complaint.

CHILDREN AND PARENT/GUARDIAN ACCESS

Because Palm Breeze Pediatrics provides pediatric services, many of our patients are minors. A parent or legal guardian generally may exercise privacy rights on behalf of a minor when legally authorized to do so. However, federal or state law may give a minor independent confidentiality or consent rights in certain circumstances. Palm Breeze Pediatrics will handle access to a minor's health information according to

HIPAA and applicable federal and Florida law. Once a patient reaches the age of majority, privacy rights generally belong to the patient unless another person has legal authority to act on the patient's behalf.

TELEHEALTH AND ELECTRONIC COMMUNICATIONS

Palm Breeze Pediatrics provides care through telehealth and may use electronic health records, video or audio technology, secure messaging, electronic prescribing, laboratory-ordering systems, email, text messaging, cloud-based systems, payment-processing systems, and other electronic technology. We use reasonable and legally required safeguards to protect PHI. However, electronic communication and technology may involve privacy and security risks, and no electronic system can be guaranteed to be completely secure.

OUR RESPONSIBILITIES

Palm Breeze Pediatrics is required to maintain the privacy and security of PHI and comply with applicable privacy laws. We will notify affected individuals if a breach occurs when notification is required by law. We may change this Notice and our privacy practices as permitted by law. A revised Notice may apply to PHI we already maintain as well as information we receive in the future. The current Notice will be available through Palm Breeze Pediatrics and on our website.

Website: PalmBreezePediatrics.com

QUESTIONS OR COMPLAINTS

If you have questions about this Notice, want to exercise a privacy right, or believe your privacy rights have been violated, contact:

Palm Breeze Pediatrics LLC
Phone: (727) 800-4782
Email: palmbreezepediatrics@gmail.com

You may also file a complaint with the **U.S. Department of Health and Human Services, Office for Civil Rights**. Palm Breeze Pediatrics will not retaliate against you for filing a complaint.

ACKNOWLEDGMENT OF RECEIPT

By checking this box and signing below, I acknowledge that I have received or been provided access to the Palm Breeze Pediatrics LLC Notice of Privacy Practices. I am either the patient who is 18 years of age or older, or the parent/legal guardian or legally authorized representative of the patient.