



Notice of Privacy Practices - Vivaa Integrative Health

Notice of Privacy Practices

Vivaa Integrative Health 270 Carpenter Drive NE, Sandy Springs, GA 30328 Phone: 678-713-3645

Effective Date: June 18, 2026

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.

Our Commitment to Your Privacy

Vivaa Integrative Health ("Vivaa," "we," "us," or "our") is dedicated to maintaining the privacy of your individually identifiable health information ("Protected Health Information" or "PHI"). This Notice describes our legal duties and privacy practices with respect to your PHI, your rights regarding that information, and how we may use and disclose it. We are required by law to maintain the privacy of your PHI, provide you with this Notice of our legal duties and privacy practices, and abide by the terms of the Notice currently in effect.

This Notice applies to all records of care generated by Vivaa Integrative Health, including care delivered via telehealth, regardless of whether the records were created or stored by Vivaa's staff, providers (including Dr. Laxmi Naik, MD; Dr. Sadielis Jimenez, ND; and Claudia Steuart), or business associates acting on Vivaa's behalf.

How We May Use and Disclose Your Health Information Without Your Written Authorization

We may use and disclose your PHI for the following purposes without obtaining your written authorization:

- **Treatment.** We may use and disclose your PHI to provide, coordinate, or manage your healthcare, including consultations between providers, referrals for lab testing, and coordination with pharmacies or supplement dispensaries (e.g., Fullscript) involved in your care.
- **Payment.** We may use and disclose your PHI to obtain payment for services, including billing, claims management, and verifying coverage.
- **Health Care Operations.** We may use and disclose your PHI for activities such as quality assessment, staff training, compliance,

- and business planning.
- **Appointment Reminders.** We may contact you to remind you of upcoming appointments or follow-up care.
- **Treatment Alternatives.** We may tell you about treatment options or health-related programs that may be of interest to you.
- **Required by Law.** We will disclose PHI when required by federal, state, or local law.
- **Public Health and Safety.** We may disclose PHI to public health authorities for purposes such as disease prevention or to avert a serious threat to health or safety.
- **Health Oversight Activities.** We may disclose PHI to oversight agencies for audits, investigations, or licensure purposes.
- **Judicial and Administrative Proceedings.** We may disclose PHI in response to a court order, subpoena, or other lawful process.
- **Law Enforcement.** We may disclose limited PHI to law enforcement under specific, limited circumstances required or permitted by law.
- **Research.** We may use or disclose PHI for research purposes where an Institutional Review Board has approved the research and reviewed the research protocol.
- **Workers' Compensation.** We may disclose PHI as authorized by workers' compensation laws.

Uses and Disclosures Requiring Your Written Authorization

Other uses and disclosures not described above — including most uses of your PHI for **marketing purposes**, and **any sale of your PHI** — will be made only with your written authorization. You may revoke an authorization at any time, in writing, except to the extent we have already relied on it.

More Restrictive Laws

Where state law or other federal law (such as 42 CFR Part 2, governing substance use disorder records) imposes stricter privacy protections than HIPAA, we will follow the more restrictive standard. Patients located in California, Washington, Tennessee, or other states with additional consumer health privacy laws may have rights beyond those described in this Notice; contact our Privacy Officer for state-specific information.

Your Rights Regarding Your Health Information

You have the right to:

1. **Inspect and obtain a copy** of your PHI, with limited exceptions.
2. **Request an amendment** to your PHI if you believe it is incomplete or incorrect.
3. **Request an accounting of disclosures** we have made of your PHI for purposes other than treatment, payment, or healthcare operations.
4. **Request restrictions** on certain uses or disclosures of your PHI. We are not required to agree to all requests, but if you paid for a service in full out-of-pocket, you may request we not disclose related PHI to a health plan, and we must honor that request.
5. **Request confidential communications**, such as contacting you

- only at a certain phone number or address.
6. **Obtain a paper copy** of this Notice at any time, even if you agreed to receive it electronically.
 7. **Be notified of a breach** of unsecured PHI, as required by law.
 8. **File a complaint** if you believe your privacy rights have been violated (see below). Filing a complaint will not affect your care or coverage.

To exercise any of these rights, contact our Privacy Officer using the information below.

Our Responsibilities

- We are required by law to maintain the privacy of your PHI.
 - We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
 - We must follow the duties and 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 by letting us know in writing.
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Changes to This Notice

We reserve the right to change this Notice at any time. Any revised Notice will apply to PHI we already have about you, as well as any information we receive in the future. A copy of the current Notice will always be available on our website and at our office location.

Complaints

If you believe your privacy rights have been violated, you may file a complaint with our Privacy Officer or with the U.S. Department of Health and Human Services, Office for Civil Rights. You will not be retaliated against for filing a complaint.

Vivaa Integrative Health Privacy Officer Address: 270 Carpenter Drive NE, Sandy Springs, GA 30328 Phone: 678-713-3645 Email: [INSERT PRIVACY OFFICER EMAIL]

U.S. Department of Health and Human Services, Office for Civil Rights 200 Independence Avenue, S.W., Washington, D.C. 20201
www.hhs.gov/ocr/privacy/hipaa/complaints

This Notice was last updated on June 18, 2026.