

NOTICE OF PRIVACY PRACTICES

1. INTRODUCTION

In compliance with HIPAA (Health Insurance Portability and Accountability Act), we are publishing this notice to disclose our policy on how your (“user”, “client”) general and health information will be used, protected, and disclosed. At Wooded Lake Wellness we assure all our clients that we will not share any kind of information about the clients without their consent. Please note that for this notice, the terms such as we, WLW, us, and our will all be referred towards the Wooded Lake Wellness. Furthermore, the data collected by our website (<https://www.woodedlakewellness.com/>) will be subject to our Privacy Policy which further provides the ways under which we process, collect and protect users’ data.

Nothing in this privacy notice constitutes, grants, or takes away any right. We are only declaring how the client’s protected health information will be shared. Please note that we are only going to be providing our services as health consultants and we will not be going to provide any medical treatments. Therefore, we will not collect the health information that is collected during the normal course of medical treatment. Users have rights under HIPAA that we respect and we have listed all the rights that users have in this notice about the services of Wooded Lake Wellness.

2. DISCLOSURE OF PROTECTED HEALTH INFORMATION

The information you provide us will only be disclosed in the following ways.

a) Providing Of Services

Primarily we will use your information to provide our services to you. The services will be provided based on the mutual agreement or as otherwise agreed upon by you and us. The information may also include any information collected through third-party services providers such as through Zoom, Skype, or any other communication platform. We will also access and store your Rupa Health’s information to maintain records. Any information provided through third-party platforms will only be kept until it is necessary for providing our services. If, however, any client of ours asks us to delete it, we will carry that request. Please note that we don’t control the data practices of Rupa Health or any of the third-party platforms and hence we are not answerable to any of the privacy practices of such other third-party platforms. Clients are urged to check the relevant data practices of any of the third-party platforms which will be collecting their data.

b) If Required By The Law

Under HIPAA we are permitted to disclose the client’s protected health information if we are asked by any legal, state, or federal authority. We are also allowed to share the information in a court of law if subpoenaed or otherwise required to give our testimony. Subject to CDC or FDA guidelines we are also required to share information that may help FDA, CDC, or any other authority to prevent a virus outbreak or otherwise help in any way.

c) Payment Purposes

WLW uses the Square payment platform as its primary payment gateway, invoice and billing purposes. Although most of the time transactions go smoothly, sometimes we may use the client's information to clear payment or help the payment processor clear a dispute.

3. NOTIFICATION OF BREACH

If there are any data breaches regards to your data or any data, in general, involving your data or stored information in any way, we will make sure to notify you by mail or e-mail, issue a press release, and file a report to the HHS secretary within 60 days of such breach.

4. PURPOSE OF THIS PRIVACY PRACTICES BASED ON HIPAA COMPLIANCE

We promise that:

- a) We will make sure that the integrity, confidentiality, and availability of the clients are protected.
- b) We will comply with the HIPAA rule of identifying and protecting information against anticipated threats to security.
- c) We will not make any reasonably anticipated, impressible uses or disclosure of the information.
- d) We will make sure that all employees and staff members comply with our Privacy Practices Notice.

5. YOUR RIGHTS

All clients have the following rights with respect to their personal health information as given in the Health Insurance Portability and Accountability Act.

a) Right To Request Restrictions.

You have the right to request a restriction or limitation on the protected health information we use to provide our services or payment purposes. You may also request WLW that any of your protected health data and information must not be disclosed to family members or friends who may be involved in your care. To request restrictions, make sure to contact us at the address provided below.

b) Right To Request Confidential Communications.

You have the right to request that WLW only communicate with you about your matters through specific channels and during certain times and at certain locations. For example, you can ask us to contact you only on Wednesday to Friday from 2 to 5 PM through your e-mail.

c) Right To Inspect And Copy.

You have the right to inspect and copy a designated set of your medical records. This designated set typically includes lab and billing records. In order to do so, you can e-mail us or call us and we will make sure to provide you with your protected health information (fees may apply in some scenarios). We may need up to 4 weeks to comply with your request.

d) Right To Request To Amend Your Data

You can request to update or modify your data. You can let us know if your data is wrong or incomplete. We will update your data based on your request in 4 to 6 weeks.

e) You Have The Right To Receive An Accounting Of Certain Disclosures

Under section 164.528, you have the right to receive an accounting of disclosures -paper or electronic- for purposes of services, payment required by law for up to six years before the date of the request.

6. CONTACT

Please contact us through any of the following ways.

E-mail: woodedlakewellness@gmail.com

Phone: (502) 882-0176