

HIPAA COMPLIANT PRIVACY **POLICY**

Introduction:

This Privacy Policy governs the use and disclosure of Protected Health Information (PHI) by Revo Weight Loss LLC, a healthcare provider located at 1841 Lakewood Ranch Blvd., Lakewood Ranch, FL 34211, USA. Revo Weight Loss operates in strict compliance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and related regulations, serving Patients in Florida and New York.

1. Use and Disclosure of Protected Health Information:

Revo Weight Loss LLC recognizes the importance of PHI in delivering quality healthcare services. As such, PHI may be used and disclosed only for legitimate purposes such as treatment, payment, and healthcare operations. This may include sharing PHI with healthcare professionals involved in your care, billing entities, and internal processes necessary for our operations. Rest assured, all disclosures will be made in accordance with applicable law and with the utmost respect for your privacy.

2. Individual Rights:

Patients in Florida and New York retain comprehensive rights concerning their PHI. These rights encompass the ability to access, inspect copy, amend, or request the removal of their PHI. Revo Weight Loss LLC acknowledges and respects these rights and is committed to facilitating their exercise. Any concerns or complaints regarding privacy violations will be promptly addressed and remedied to the best of our abilities.

3. Legal Duties and Safeguards:

Revo Weight Loss LLC, with locations in Lakewood Ranch, FL, St. Petersburg, FL, and Buffalo, NY, is steadfast in its legal obligations to safeguard PHI. We adhere to stringent administrative, technical, and physical safeguards to protect PHI from unauthorized access, use, or disclosure. Any breaches or unauthorized disclosures of PHI will be promptly addressed and reported as required by HIPAA regulations and other applicable laws.

4. Contact Information:

For further information regarding our company's privacy policies or to exercise your rights concerning Protected Health Information (PHI), please feel free to contact our

Privacy Officer at (941) 201-5851 or visit us at 1841 Lakewood Ranch Blvd., Lakewood Ranch, FL 34211 USA. Our dedicated Privacy Officer is readily available to address any inquiries or concerns you may have regarding the confidentiality and security of your PHI. Ensuring your satisfaction and peace of mind is our paramount concern.

5. Notice of Privacy Practices:

A comprehensive Notice of Privacy Practices is available for review in our physical locations and on our website. This notice outlines your rights and our obligations regarding PHI under HIPAA regulations. We strongly encourage all Patients to review this notice to gain a comprehensive understanding of how their PHI is handled and their rights under HIPAA.

6. Changes to Privacy Policy:

Revo Weight Loss LLC reserves the unequivocal right to update or modify this Privacy Policy as necessary to maintain compliance with HIPAA regulations or other legal requirements. Any revisions to this policy will be promptly communicated to Patients and prominently posted on our website. It is your responsibility to review this policy periodically to stay informed about any updates or changes.

7. Legal Jurisdiction:

This Privacy Policy is governed by and construed in accordance with the laws of the State of Florida, without regard to its conflict of law principles. Any disputes arising out of or related to this Privacy Policy shall be subject to the exclusive jurisdiction of the courts located in the State of Florida. This provision ensures clarity and consistency in the interpretation and enforcement of this policy.

Conclusion:

Ensuring the privacy and security of your Protected Health Information (PHI) is a top priority at Revo Weight Loss LLC. With locations in Lakewood Ranch, FL, St. Petersburg, FL, and Buffalo, NY, we are steadfastly committed to upholding HIPAA standards and safeguarding the confidentiality and integrity of your PHI. Should you have any inquiries or apprehensions regarding our Privacy Policy or the management of your PHI, please feel free to reach out to us.

Signature: _____

Date: _____

Witness: _____

Date: _____