Your Information. Your Rights. Our Responsibilities.

Notice of Privacy Practices - Effective October 1, 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.

Physician Partners of America (PPOA)
501 N Reo Street, Tampa, FL 33609
www.physicianpartnersofamerica.com
Privacy contact: Sheryl Mayoz, Chief Compliance & Privacy Officer
813-549-2134 ext. 2013 | SMayoz@physicianpartnersoa.com

Your Rights

• Get an electronic or paper copy of your medical record; request a correction.

• Request confidential communications or limits on certain sharing.

• Receive an accounting of certain disclosures and a copy of this notice.

• Appoint a personal representative and file a privacy complaint without retaliation.

Your Choices

You may tell us your preferences about communications with family, friends, disaster-relief organizations, and certain other uses. Certain uses, such as marketing, sales of PHI, and most disclosures of psychotherapy notes, require written authorization.

Our Uses and Disclosures

We may use or disclose health information for treatment, payment, health care operations, and other activities permitted or required by law, subject to additional restrictions for certain records, including substance use disorder records governed by 42 CFR Part 2.

Effective Date: October 1, 2026

Your Rights

When it comes to your health information, you have certain rights. This section explains those rights and our responsibilities.

Get your medical record	You can ask to inspect or obtain an electronic or paper copy of your record and other health information we maintain about you. We generally provide a copy or summary within 30 days and may charge a reasonable, cost-based fee as permitted by law.
Request a correction	You may ask us to amend information you believe is incorrect or incomplete. We may deny the request in legally permitted circumstances, but will explain the decision in writing, generally within 60 days.
Confidential communications	You may request that we contact you using a specific method or address. We will accommodate reasonable requests.
Request restrictions	You may ask us to limit uses or disclosures for treatment, payment, or operations. We are not generally required to agree. If you pay for an item or service completely out of pocket, you may request that we not disclose it to your health plan for payment or operations, and we will honor the restriction unless disclosure is legally required.
Accounting of disclosures	You may request an accounting of certain disclosures made during the six years before your request. Generally, the first accounting within a 12-month period is free; a permissible cost-based fee may apply to additional accountings.
Notice and representatives	You may request a paper copy of this notice, even if you agreed to receive it electronically. An authorized personal representative may exercise your rights after we verify their authority.
File a complaint	Contact PPOA using the details in this notice or the U.S. Department of Health and Human Services Office for Civil Rights at www.hhs.gov/ocr/privacy/hipaa/complaints/. We will not retaliate against you.

Your Choices

For certain health information, you can tell us your preferences about what we share.

Family, friends and others	You may direct whether we share relevant information with family, close friends, or others involved in your care, including in a disaster relief situation. When you cannot tell us your preference, we may share as permitted by law and professional judgment.
Authorization required	We will obtain your written authorization for uses and disclosures where HIPAA requires it, including most marketing uses, a sale of protected health information, and most uses or disclosures of psychotherapy notes if maintained. You may revoke authorization in writing, subject to actions already taken in reliance on it.
Fundraising	We may contact you about fundraising if permitted by law. You may opt out of future fundraising communications. If fundraising would use records governed by 42 CFR Part 2, additional advance notice and choice protections apply.

Our Uses and Disclosures

How do we typically use or share your health information?

Treat you	We may use your health information and share it with other treating professionals to provide and coordinate care. Example: a physician consults with another physician about treatment options.
Run our organization	We may use or disclose health information for permitted health care operations, including quality improvement, care coordination, management and compliance activities. Example: reviewing operations to improve patient services.
Bill for services	We may use and share relevant information with health plans or other payers to obtain payment for services.
Business associates	We may use vendors that perform authorized functions involving PHI under required written agreements and HIPAA safeguards. We do not treat an ordinary website cookie acceptance as a HIPAA authorization.

Other Permitted or Required Uses and Disclosures

Public health and safety	As permitted or required by law, we may report disease, product issues, adverse drug reactions, certain abuse or neglect, or respond to a serious threat to health or safety.
Research	We may use or disclose information for health research when the applicable legal requirements and approvals or authorizations are satisfied.
Comply with the law	We will disclose information when federal or state law requires it, including to HHS for a HIPAA compliance review.
Organ donation and death	We may share information with organ procurement organizations, coroners, medical examiners, or funeral directors as permitted by law.
Government and legal requests	We may disclose information for authorized workers compensation, health oversight, law enforcement, government functions, and lawful court or administrative process, subject to all applicable limitations.
More-protective laws	Some categories of health information, including certain mental health, HIV-related, genetic, and substance use disorder information, may receive additional protections under applicable federal or state law. We comply with those additional restrictions when they apply.

Substance Use Disorder Records - 42 CFR Part 2

Some substance use disorder patient records are protected by the federal confidentiality rules in 42 CFR Part 2. When those rules apply, PPOA follows their additional requirements, including applicable patient consent requirements for uses and disclosures. A single consent may permit future treatment, payment, and health care operations uses and disclosures as allowed by Part 2.

Part 2 records generally may not be used or disclosed in civil, criminal, administrative, or legislative proceedings against a patient without the patient's specific written consent or an appropriate Part 2 court order accompanied by a subpoena or similar legal requirement. A recipient otherwise permitted to redisclose a Part 2 record under HIPAA remains subject to these protections against use in proceedings against the patient.

Technology, Security, and Our Responsibilities

Artificial intelligence	PPOA utilizes AI to assist with supplemental clinical considerations and information. AI is not intended to replace medical review, clinical judgment, or decision-making. Clinical decisions are made by independent professional medical judgment. AI use involving PHI must meet applicable HIPAA requirements, including appropriate vendor safeguards and agreements when required.
Website technologies	PPOA websites may use technologies necessary for secure and reliable site functions. The separate Website Privacy Policy should explain actual cookies, analytics, advertising technologies, applicable state-law notices, and consumer choices. Third-party analytics or advertising technologies must not be used to disclose PHI except as expressly permitted by applicable law. A cookie banner does not replace HIPAA authorization.
Privacy and security	We are required by law to maintain the privacy and security of protected health information; implement applicable safeguards; and limit uses and disclosures to those permitted or required by law.
Breach notification	We will provide notifications concerning breaches of unsecured PHI as required by applicable law.
Terms of this notice	We must follow the privacy practices described in the notice currently in effect. We may change the terms of our notice, with changes applying to information we maintain. The revised notice will be available on our website, at our offices, and on request.
Information and complaints	Sheryl Mayoz, Chief Compliance & Privacy Officer 501 N Reo Street, Tampa, FL 33609 813-549-2134 ext. 2013 SMayoz@physicianpartnersoa.com

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PPOA does not create or maintain psychotherapy notes at this practice.