

Notice of Privacy Practices

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.

Effective date: November 1, 2026. This notice replaces all earlier Passion Health notices of privacy practices.

Who follows this notice

This notice is given jointly by Passion Health Primary Care (PHP INS TX PLLC) and Passion Health Physicians, PLLC (together, “Passion Health,” “we” or “us”). These practices are under common ownership and have designated themselves a single affiliated covered entity under HIPAA, so they follow one set of privacy practices.

It applies to the health information we create or receive about you wherever we care for you:

- at every Passion Health clinic and service;
- through Passion Health Online Care, our online visits at passionhealthphysicians.com/online-care;
- in the PHi patient portal; and
- by phone, video, text message and email.

Our physicians, nurse practitioners, physician assistants, staff, students and volunteers all follow it.

Our duties

- We are required by law to keep your protected health information private and to give you this notice of our legal duties and privacy practices.
- We must follow the notice currently in effect.
- We will tell you promptly if a breach occurs that may have compromised the privacy or security of your information.
- We will not use or share your information other than as described here unless you tell us in writing that we can. If you give us permission, you can change your mind at any time by telling us in writing. This won't undo anything we already did with your permission.

Your rights

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

Get a copy of your medical record

- You can ask to see or get a copy of your medical record and other health information we have about you, on paper or electronically. Ask us in writing; you can use the PHi portal or contact our Privacy Officer.

- We will give you a copy or a summary, usually within 15 business days of your request, as Texas law requires, and never later than HIPAA allows.
- If your record is electronic, we will give it to you electronically unless you agree to another form.
- We may charge a reasonable, cost-based fee.

Ask us to correct your medical record

- You can ask us in writing to correct health information you think is incorrect or incomplete, and tell us why.
- We may say no, but we will tell you why in writing within 60 days.

Request confidential communications

- You can ask us to contact you in a specific way (for example, by home or office phone, or only through the portal) or to send mail to a different address.
- We will say yes to all reasonable requests.

Ask us to limit what we use or share

- You can ask us not to use or share certain health information for treatment, payment or our operations. We are not required to agree, and we may say no if it would affect your care.
- If you pay for a service or item out of pocket in full, you can ask us not to share that information with your health insurer for payment or our operations. We will say yes unless a law requires us to share it.

Get a list of those with whom we've shared information

- You can ask for a list (accounting) of the times we've shared your health information in the six years before your request, who we shared it with, and why.
- The list won't include disclosures for treatment, payment and health care operations, and certain others (such as any you asked us to make).
- We provide one list a year at no charge but may charge a reasonable, cost-based fee if you ask for another one within 12 months.

Get a copy of this notice

You can ask for a paper copy of this notice at any time, even if you agreed to receive it electronically. It is also posted in our clinics and on our website, and linked from every Online Care visit.

Choose someone to act for you

If you have given someone medical power of attorney, or someone is your legal guardian, that person can exercise your rights and make choices about your health information. We will make sure the person has this authority before we take any action.

File a complaint if you feel your rights are violated

- You can complain to our Privacy Officer using the contact information at the end of this notice.
- You can also file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights:
 - by mail to 200 Independence Avenue SW, Washington, D.C. 20201;
 - by phone at 1-877-696-6775; or

- online at www.hhs.gov/ocr/complaints.
- We will not retaliate against you for filing a complaint.

Your choices

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations below, tell us, and we will follow your instructions.

In these cases, you have both the right and the choice to tell us to:

- share information with your family, close friends or others involved in your care or in paying for it;
- share information in a disaster relief situation.

If you are not able to tell us your preference (for example, if you are unconscious), we may share your information if we believe it is in your best interest. We may also share it when needed to lessen a serious and imminent threat to health or safety.

In these cases, we never share your information unless you give us written permission:

- marketing;
- sale of your information; and
- most sharing of psychotherapy notes.

We do not sell your health information, and we do not use it for advertising.

We may remove the details that identify you from health information, following the HIPAA de-identification standard, and use the de-identified information to study and improve care. De-identified information is no longer about an identifiable person, and we do not try to re-identify it.

We do not conduct fundraising. If that ever changes, we will tell you first, and you can ask us not to contact you again.

How we use and share your health information

We typically use or share your health information in the following ways.

To treat you

We use your health information and share it with other professionals who are treating you. Examples:

- a Passion Health clinician reviews the answers, photos and voice recordings you send through Online Care, or talks with you by video;
- we send a prescription to the pharmacy you choose, or order lab tests from the laboratory;
- we refer you to a specialist;
- with your permission, we send a record of an Online Care visit to your primary care physician.

We may also receive your medication history from pharmacies through electronic prescribing networks so that we can prescribe safely.

Health information exchanges

We take part in health information exchanges: secure networks, including those connected through our electronic health record, that let the clinicians, hospitals and laboratories treating you share your records

electronically, and let us see records from other places you have received care. Sharing through an exchange is for treatment, payment and health care operations, and follows this notice and the law. You can ask us not to share your information through these exchanges by contacting our Privacy Officer. Opting out does not stop disclosures the law separately allows or requires, and it may mean other clinicians can't see your Passion Health records when they treat you.

To run our organization

We can use and share your health information to run our practice, improve your care and contact you when necessary. Examples include:

- quality and safety reviews;
- training of clinicians and staff;
- checking your insurance eligibility;
- reminders and check-ins about your care by text, email, phone or the portal.

To bill for your services

We can use and share your health information to bill and get payment from health plans or other entities. Examples:

- We give information about you to your health insurance plan, Medicare or Medicaid so it will pay for your services.
- If you choose a self-pay price for an Online Care visit, we do not send a claim to your insurance for that visit.

With companies that help us (business associates)

We use outside companies to provide services for us, for example:

- our electronic health record;
- secure hosting of the Online Care intake;
- email and text-message delivery;
- payment processing;
- laboratory services; and
- billing and transcription.

We share only what they need. Each must sign an agreement promising to protect your information as HIPAA requires.

How else can we use or share your health information?

We are allowed or required to share your information in other ways, usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes.

- **Help with public health and safety issues.** For example:
 - reporting certain diseases to public health authorities, as Texas law requires;
 - helping with product recalls;
 - reporting adverse reactions to medicines;
 - reporting suspected abuse, neglect or domestic violence;

- preventing or reducing a serious threat to anyone's health or safety.
- **Do research.** We can use or share your information for health research only with your written authorization, or when an institutional review board or privacy board has approved the research under the law's privacy protections. We will not contact you about research studies unless you have signed a separate authorization, and saying no never affects your care.
- **Comply with the law.** We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law.
- **Respond to organ and tissue donation requests,** and work with a medical examiner, justice of the peace or funeral director when an individual dies.
- **Address workers' compensation, law enforcement and other government requests.** We can use or share your health information:
 - for workers' compensation claims;
 - for law enforcement purposes or with a law enforcement official, as the law allows;
 - with health oversight agencies, such as the Texas Medical Board, for activities authorized by law;
 - for special government functions such as military, national security and presidential protective services; and
 - with correctional institutions about an inmate in their custody.
- **Respond to lawsuits and legal actions.** We can share health information in response to a court or administrative order, or in response to a subpoena when the law's conditions are met.

Information with extra protection

Some kinds of health information have stronger protection under federal or Texas law. Where those laws are stricter than HIPAA, we follow them.

- **Mental health records.** Records of mental or emotional conditions are confidential under Texas law (Texas Health and Safety Code, Chapter 611). We share them only as that law allows.
- **HIV and certain test results.** Results of HIV tests and certain other tests are confidential under Texas law. We share them only as the law allows.
- **Substance use disorder treatment records** (42 CFR Part 2). If we receive or keep records of substance use disorder treatment that are protected by federal law:
 - We use and share them only as that law allows. Usually this needs your written consent, which can be a single consent for treatment, payment and health care operations.
 - Those records, and testimony about what they contain, will not be used or shared in any civil, criminal, administrative or legislative proceeding against you unless you give written consent, or a court orders it after you have had notice and a chance to be heard, together with a subpoena or other legal requirement compelling the disclosure.
 - We do not use these records for fundraising.
- **Psychotherapy notes.** We share them only with your written authorization, except in the limited cases the law allows.
- **Genetic information.** We do not use or share genetic information to make decisions about insurance coverage.

Online Care, video visits and electronic communication

- When you use Passion Health Online Care, your answers, photos, voice recordings, identity and insurance documents become part of your health record. This includes your medication labels, emergency contact and location during a video visit. They are protected by this notice.
- We do not record video visits unless we tell you first and you agree.
- Email and ordinary text messages are not fully secure. Use the PHI portal for detailed health questions. You can ask us to communicate only in certain ways.
- Our Online Care pages do not use advertising or tracking technologies. Our website's [Privacy Policy](#) and [Cookie Policy](#) explain how the rest of our website handles information.

Texas notice: electronic disclosure of health information

Your protected health information may be disclosed electronically. Texas law requires us to tell you this.

We will ask for your authorization before we disclose your information electronically for any purpose other than:

- treatment;
- payment;
- health care operations;
- insurance or HMO functions the law allows; or
- as otherwise authorized or required by state or federal law.

Texas Health and Safety Code §181.154.

Changes to the terms of this notice

We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available on request, in our clinics, and on our website.

Nondiscrimination and language assistance

Nondiscrimination notice

Passion Health (Passion Health Primary Care and Passion Health Physicians, PLLC) complies with applicable federal civil rights laws and does not discriminate, exclude people, or treat them differently on the basis of race, color, national origin, age, disability, or sex, including sex characteristics, pregnancy or related conditions, and sexual orientation.

Passion Health provides, free of charge:

- reasonable modifications and appropriate auxiliary aids and services to people with disabilities, such as qualified sign language interpreters and written information in other formats (large print, audio, accessible electronic formats);
- language assistance to people whose primary language is not English, such as qualified interpreters and information written in other languages.

If you need these services, call [214-666-6259](tel:214-666-6259) (TTY: 711) or ask any staff member.

If you believe Passion Health has failed to provide these services or has discriminated in another way, you can file a grievance with:

Anantha Chentha, MD, Section 1557 Coordinator

230 O'Connor Ridge Blvd., Suite 110, Irving, Texas 75038

Phone: [214-666-6259](tel:214-666-6259) (TTY: 711) · Email: mycare@passionhealthphysicians.com

You can file a grievance in person, by mail, by phone or by email. If you need help filing a grievance, the Section 1557 Coordinator can help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal at ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone: U.S. Department of Health and Human Services, 200 Independence Avenue SW, Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 800-537-7697 (TDD). Complaint forms are available at hhs.gov/ocr/office/file/index.html.

Language assistance and accessible formats

English: ATTENTION: If you speak a language other than English, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Call 214-666-6259 (TTY: 711) or speak to your provider.

Español: ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Llame al 214-666-6259 (TTY: 711) o hable con su proveedor.

Tiếng Việt: LƯU Ý: Nếu bạn nói tiếng Việt, chúng tôi cung cấp miễn phí các dịch vụ hỗ trợ ngôn ngữ. Các hỗ trợ và dịch vụ phù hợp để cung cấp thông tin theo các định dạng dễ tiếp cận cũng được cung cấp miễn phí. Vui lòng gọi số 214-666-6259 (TTY: 711) hoặc trao đổi với người cung cấp dịch vụ của bạn.

繁體中文: 注意：如果您說中文，我們可以為您提供免費語言協助服務。也可以免費提供適當的輔助工具與服務，以無障礙格式提供資訊。請致電 214-666-6259 (TTY: 711) 或與您的提供者討論。

简体中文: 注意：如果您說中文，我們將免費為您提供語言協助服務。我們還免費提供適當的輔助工具和服务，以无障礙格式提供信息。致电 214-666-6259 (文本电话: 711) 或咨询您的服务提供商。

한국어: 주의: 한국어를 사용하시는 경우 무료 언어 지원 서비스를 이용하실 수 있습니다. 이용 가능한 형식으로 정보를 제공하는 적절한 보조 기구 및 서비스도 무료로 제공됩니다. 214-666-6259 (TTY: 711)번으로 전화하거나 서비스 제공업체에 문의하십시오.

العربية: تنبيه: إذا كنت تتحدث العربية، فإن خدمات المساعدة اللغوية المجانية متاحة لك. تتوفر أيضًا الوسائل والخدمات المساعدة المناسبة لتقديم المعلومات بصيغ يسهل الوصول إليها مجانًا. اتصل بالرقم 214-666-6259 (الهاتف النصي: 711) أو تحدث إلى مقدم الخدمة الخاص بك.

اردو: توجہ دیں: اگر آپ اردو بولتے ہیں تو آپ کے لیے زبان کی مفت مدد کی خدمات دستیاب ہیں۔ قابل رسائی فارمیٹس میں معلومات فراہم کرنے کے لیے مناسب معاون امداد اور خدمات بھی مفت دستیاب ہیں۔ (214-666-6259 (TTY: 711) پر کال کریں یا اپنے فراہم کنندہ سے بات کریں۔

Tagalog: PAALALA: Kung nagsasalita ka ng Tagalog, magagamit mo ang mga libreng serbisyong tulong sa wika. Magagamit din nang libre ang mga naaangkop na auxiliary na tulong at serbisyo upang magbigay ng impormasyon sa mga naa-access na format. Tumawag sa 214-666-6259 (TTY: 711) o makipag-usap sa iyong provider.

Français: ATTENTION : Si vous parlez français, des services d'assistance linguistique gratuits sont à votre disposition. Des aides et services auxiliaires appropriés pour fournir des informations dans des

formats accessibles sont également disponibles gratuitement. Appelez le 214-666-6259 (TTY : 711) ou parlez à votre fournisseur.

हिंदी: ध्यान दें: यदि आप हिंदी बोलते हैं, तो आपके लिए निःशुल्क भाषा सहायता सेवाएं उपलब्ध हैं। सुलभ प्रारूपों में जानकारी प्रदान करने के लिए उपयुक्त सहायक साधन और सेवाएँ भी निःशुल्क उपलब्ध हैं। 214-666-6259 (TTY: 711) पर कॉल करें या अपने प्रदाता से बात करें।

فارسی: توجه: اگر به زبان فارسی صحبت می‌کنید، خدمات رایگان کمک زبانی در دسترس شما است. همچنین وسایل و خدمات کمکی مناسب برای ارائه اطلاعات در قالب‌های قابل دسترس به صورت رایگان در دسترس است. لطفاً با شماره 214-666-6259 (TTY: 711) تماس بگیرید یا با ارائه‌دهنده خود صحبت کنید.

Deutsch: ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachassistentendienste zur Verfügung. Entsprechende Hilfsmittel und Dienste zur Bereitstellung von Informationen in barrierefreien Formaten stehen ebenfalls kostenlos zur Verfügung. Rufen Sie 214-666-6259 (TTY: 711) an oder sprechen Sie mit Ihrem Provider.

ગુજરાતી: ધ્યાન આપો: જો તમે ગુજરાતી બોલતા હો તો મફત ભાષાકીય સહાયતા સેવાઓ તમારા માટે ઉપલબ્ધ છે. સુલભ ફોર્મેટમાં માહિતી પૂરી પાડવા માટે યોગ્ય સહાયક સાધનો અને સેવાઓ પણ વિના મૂલ્યે ઉપલબ્ધ છે. 214-666-6259 (TTY: 711) પર કૉલ કરો અથવા તમારા પ્રદાતા સાથે વાત કરો.

Русский: ВНИМАНИЕ: Если вы говорите по-русски, вам доступны бесплатные услуги языковой поддержки. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также предоставляются бесплатно. Позвоните по телефону 214-666-6259 (TTY: 711) или обратитесь к своему поставщику услуг.

日本語: 注：日本語を話される場合、無料の言語支援サービスをご利用いただけます。アクセシブルな形式で情報を提供するための適切な補助支援やサービスも無料でご利用いただけます。214-666-6259 (TTY : 711) までお電話ください。または、ご利用の事業者にご相談ください。

ລາວ: ເຊີນຊາບ: ຖ້າທ່ານເວົ້າພາສາລາວ, ຈະມີບໍລິການຊ່ວຍເຫຼືອພາສາແບບບໍ່ເສຍຄ່າໃຫ້ທ່ານ. ມີເຄື່ອງຊ່ວຍ ແລະ ການບໍລິການແບບບໍ່ເສຍຄ່າທີ່ເໝາະສົມເພື່ອໃຫ້ຂໍ້ມູນໃນຮູບແບບທີ່ສາມາດເຂົ້າເຖິງໄດ້. ໂທຫາເບີ 214-666-6259 (TTY: 711) ຫຼື ພົມກັບຜູ້ໃຫ້ບໍລິການຂອງທ່ານ.

తెలుగు: సావధానం: మీరు తెలుగు మాట్లాడితే, మీకు ఉచిత భాషా సహాయ సేవలు అందుబాటులో ఉంటాయి. అందుబాటులో ఉండే ఫార్మాట్‌లలో సమాచారాన్ని అందించడానికి తగిన సహాయక సాధనాలు మరియు సేవలు కూడా ఉచితంగా అందుబాటులో ఉంటాయి. 214-666-6259 (TTY: 711) కి కాల్ చేయండి లేదా మీ ప్రొవైడర్‌తో మాట్లాడండి.

Contact our Privacy Officer

Anantha Chentha, MD, Privacy Officer, Passion Health
230 O'Connor Ridge Blvd., Suite 110, Irving, Texas 75038
Phone: 214-666-6259 · Email: mycare@passionhealthphysicians.com

This notice is required by the HIPAA Privacy Rule (45 CFR 164.520).

Acknowledgment of Receipt of the Notice of Privacy Practices

I acknowledge that I have received a copy of the Passion Health Notice of Privacy Practices, effective November 1, 2026.

Patient name (print) Date of birth

Signature of patient or personal representative Date

If signed by a personal representative, name and relationship to the patient:

For office use only

If the patient did not sign, describe the good-faith effort made to obtain acknowledgment and the reason it was not obtained:

☐ Patient refused to sign
☐ Emergency treatment
☐ Other (describe):

Staff name Date

Online Care visits record this acknowledgment electronically in the intake.