



Notice of Privacy Practices

Altamonte Medical Associates, P.A.

Overview

This Notice of Privacy Practices describes how your medical information may be used and disclosed and how you can access this information. Altamonte Medical Associates, P.A. is committed to maintaining the confidentiality, integrity, and security of your protected health information (PHI) in accordance with all applicable federal and state regulations, including HIPAA.

Uses and Disclosures of Your Information

We may use and disclose your protected health information for purposes of treatment, payment, and healthcare operations. Treatment includes providing, coordinating, or managing your healthcare and related services, including consultation with other healthcare providers. Payment includes billing, claims management, and collection activities necessary to obtain reimbursement. Healthcare operations include quality assessment, performance improvement, credentialing, training, compliance, and administrative activities that support the functioning of the practice.

Telehealth Services

We may provide care through telehealth platforms, including synchronous video visits, asynchronous communication, secure messaging, and remote monitoring. While we utilize HIPAA-compliant technologies whenever possible, electronic communication carries inherent risks. By engaging in telehealth, you acknowledge and accept these risks as part of your care experience.

Concierge and Enhanced Communication

As part of our personalized care model, patients may have access to enhanced communication methods, including direct physician access via phone, secure messaging, or email. While we implement safeguards, these methods may introduce additional privacy considerations, which you acknowledge and accept.

Other Permitted and Required Disclosures

We may disclose your information as required by law, including for public health reporting, health oversight activities, law enforcement requests, and to prevent or lessen serious threats to health or safety. We may also disclose information for workers' compensation and other legally mandated purposes.

Your Rights

You have the right to: - Access and obtain copies of your medical records - Request amendments or corrections to your records - Request restrictions on certain uses and disclosures - Request confidential communications through alternative means - Receive an accounting of disclosures - Obtain a paper or electronic copy of this notice at any time

Our Responsibilities

We are required by law to maintain the privacy of your protected health information, provide you with this notice, notify you in the event of a breach, and abide by the terms currently in effect. We reserve the right to revise this notice and make updates applicable to all protected health information we maintain.

Contact Information

Altamonte Medical Associates, P.A. If you have questions, concerns, or complaints regarding your privacy rights, you may contact our office. You may also file a complaint with the U.S. Department of Health and Human Services. You will not be penalized for filing a complaint.

Effective Date: April 18, 2026