HIPAA Notice of Privacy Practices

One Heart Healthcare, LLC | Effective November 6, 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.

Privacy contact: Sachiko Nakano, 206-579-7454; onehearthc@icloud.com. Contact us to exercise the rights below or ask how to submit a written request. Avoid sending detailed medical information through the general website contact form.

Your access and correction rights

See or obtain records. You may request paper or electronic copies of the health information we maintain about you. We respond promptly under Washington law, generally acting within 15 working days. If unusual circumstances cause a delay, we explain it in writing and state when the request will be resolved, within applicable limits. Access may be limited where law permits; we explain applicable denial and review rights. Any charge will comply with law.

Request a correction. Ask in writing to amend information you believe is inaccurate or incomplete. We may deny an amendment in circumstances allowed by law but will explain the reason and how to submit a statement of disagreement. We act on written correction requests within 10 days of receiving them. If an allowed delay applies, we will explain it in writing and tell you when we will resolve the request, no later than 21 days after receiving it.

Your communication and disclosure choices

Confidential contact. You may request a particular phone number, mailing address, or other reasonable way to communicate. We accommodate reasonable requests. Ordinary email and text can carry privacy risks; tell us your communication preferences.

Restrictions. You may ask us to limit use or disclosure for treatment, payment, or operations. We are not required to accept every restriction. However, if you pay for an item or service entirely out of pocket, we must honor a request not to disclose that information to your health plan for payment or operations, unless disclosure is legally required. Tell us before a claim is submitted.

Disclosure history. Request an accounting of certain disclosures made during the preceding six years. It generally excludes disclosures for treatment, payment, and operations, disclosures you authorized, and other legally exempt disclosures. One accounting in 12 months is free; any additional permitted fee will be explained in advance.

Your representative. Someone with verified legal authority, such as a health care agent or guardian, may exercise rights for you, subject to legal limits. You may tell us whether to discuss relevant information with family or others involved in your care or payment. When you cannot express a preference, limited sharing may be allowed in your best interests or in an emergency.

Copies, questions and complaints

You may obtain a paper copy of this notice even if you received it electronically. Contact Sachiko using the details above if you have questions or a privacy complaint. You may also complain to the U.S. Department of Health and Human Services (HHS) Office for Civil Rights: 200 Independence Avenue SW, Washington, DC 20201; www.hhs.gov/hipaa/filing-a-complaint/index.html. We will not retaliate or make you waive the right to complain.

Routine uses and disclosures

Treatment. We use your information to assess needs and provide care and may share relevant information with treating professionals as permitted by law; for example, coordinating with your physician.

Payment. We may send information needed for a claim to your insurer, subject to applicable restrictions.

Operations. We use information to manage records, review care, arrange appointments, and run the practice. Service providers may handle information for these purposes under required privacy agreements.

Other legally permitted or required disclosures

Where legal conditions are met, we may disclose information for public health reporting, reporting abuse or neglect, preventing a serious threat, health oversight, workers' compensation, permitted law enforcement or special government functions, organ donation, or a coroner, medical examiner, or funeral director. We may disclose information as legally required, including to HHS for compliance review, or in response to qualifying court orders or other legal process. A request alone does not automatically authorize release. Research disclosures require the applicable authorization or another lawful basis. We limit disclosures as required by law.

Uses requiring your written authorization
We do not sell patient information. We do not disclose it for third-party marketing. We obtain your written authorization before using or sharing your health information for marketing when the law requires it. Other uses not described here also require authorization unless law permits or requires them. You may revoke an authorization in writing, except to the extent we have already relied on it. Photographs, identifiable case reports and research participation are not authorized by signing the intake form. If proposed, we will explain the specific purpose and obtain any required separate permission. You may decline. Any legally permitted research disclosure without individual authorization must meet the relevant safeguards.

Additional protections for sensitive records
Washington law may impose stricter rules for certain information, including mental health, HIV, sexually transmitted infection, and substance use treatment records. We follow the more protective applicable requirements, including additional consent where required.

If we hold substance use disorder records protected by 42 CFR Part 2, we will not use or disclose them in civil, criminal, administrative, or legislative investigations or proceedings against you without your written consent or a qualifying court order together with a subpoena or similar legal mandate.

Our duties, record retention and changes
We must protect the privacy and security of your protected health information, follow this notice, provide a copy, and notify you as required if a breach affects unsecured protected health information. We maintain treatment records for at least 7 years after the last treatment and longer when required; for minors, at least until 6 years after age 18.

We may revise this notice as law allows and apply revised terms to information already held. The office and our website provide the current notice. Material changes will be reflected in an updated notice.

This notice concerns patient health information.