

Bayou City Breastfeeding, LLC

Notice of Privacy Practices

Version 2026.1 • Effective 05/04/2026

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.

The current version of this Notice is posted on BCB's website and available on request. Material revisions will be posted within 60 days of revision.

Notice of Electronic Disclosure (Texas Health & Safety Code §181.154). Bayou City Breastfeeding uses electronic systems (including the Jane practice management system, secure messaging platforms, billing systems, AI-supported documentation tools, and electronic claim-submission and payment systems) to maintain and disclose your protected health information. This means your PHI may be transmitted electronically for treatment, payment, and health care operations, and to business associates that have agreed to protect your information. You may withdraw your consent to electronic disclosure prospectively to the extent permitted by law and may request that BCB communicate with you in a non-electronic way for any specific purpose.

Who this notice applies to

This Notice of Privacy Practices applies to Bayou City Breastfeeding, LLC and its workforce, including clinicians, administrative team members, billing team members, trainees, contractors, and business associates who help us provide care, process payment, or operate the practice.

When this notice says "we," "us," or "our," it means Bayou City Breastfeeding. When this notice says "you," it means the client receiving services and, when applicable, the parent, guardian, or other person legally authorized to act for a baby or minor client.

Our privacy responsibilities

We are required by law to maintain the privacy and security of protected health information, give you this notice, follow the terms of the notice currently in effect, notify you if a breach may have compromised the privacy or security of your information, and not use or share your information except as described in this notice or as allowed or required by law. Where Texas law (or another state's law applicable to a particular communication) is more protective of your privacy than HIPAA, the more protective law controls.

Treatment

We may use and share your information to provide, coordinate, or manage care. For example, we may document your lactation, chiropractic, or other visit, communicate with your or your baby's healthcare providers, and use photos, videos, visit notes, or care plans when needed for care and permitted by your signed consents.

Payment

We may use and share your information to bill and receive payment for services. For example, we may send claims to your insurance plan, communicate with The Lactation Network, Wildflower, third-party billers, review programs, or other billing partners, and share information needed to verify benefits, submit claims, pursue appeals, process refunds, or collect patient-responsibility balances.

Health care operations

We may use and share your information to operate and improve the practice. This may include quality review, staff training, compliance review, billing audits, technology support, credentialing, business planning, customer service, and responding to complaints.

Fundraising

BCB may, on a limited basis, contact you for fundraising purposes consistent with HIPAA. Each fundraising communication will include a clear and easy way to opt out of receiving future fundraising communications from BCB. Opting out will not affect your treatment or eligibility for services

Other uses and disclosures allowed or required by law

We may use or share your information when allowed or required by law. This may include disclosures to comply with federal, Texas, or local law; respond to court orders, subpoenas, or legal process when legally required; report suspected abuse, neglect, domestic violence, or threats of harm when required or permitted by law; prevent or reduce a serious and imminent threat to health or safety; support public health activities; support health oversight activities; support workers' compensation or similar programs; or support law enforcement or specialized government functions when legally permitted or required.

Business associates

We may share information with companies or individuals who perform services for us and who need protected health information to do that work. These may include billing services, electronic health record systems, secure communication platforms, payment processors, AI-supported documentation tools, IT vendors, legal or compliance consultants, and other support services. When required by HIPAA, these vendors must sign a Business Associate Agreement and protect your information.

Communications with you

We may contact you by phone, secure message, email, mail, or text message for care coordination, appointment reminders, billing, payment, follow-up, and other non-marketing practice communications. Standard email and text messaging may not be fully secure. You may ask us to communicate with you in a different way or at a different location.

Marketing

We will not use or disclose your protected health information for marketing purposes unless you sign a separate written authorization, except where HIPAA allows communication without authorization. Examples of uses that generally require separate authorization include using your name or image in a

testimonial, sharing your story on the website or social media, using photos or videos for promotional materials, or sending marketing messages that use protected health information and require authorization under HIPAA. You may revoke a marketing authorization in writing at any time. Revocation will not affect uses or disclosures already made in reliance on the authorization.

Sale of protected health information

We will not sell your protected health information without your written authorization. If any authorized disclosure would involve payment to Bayou City Breastfeeding in a way that HIPAA treats as a sale of protected health information, the authorization will say so.

Right to inspect and receive a copy

You may ask to inspect or receive a copy of your medical or billing records. We may charge a reasonable, cost-based fee when allowed by law.

Right to request correction

You may ask us to correct information you believe is incorrect or incomplete. We may deny the request in some circumstances, but we will explain why in writing.

Right to request confidential communications

You may ask us to contact you in a specific way or at a specific location. We will honor reasonable requests.

Right to request limits on use or disclosure

You may ask us not to use or share certain information for treatment, payment, or operations. We are not required to agree to every request, but we will consider it. If you pay out of pocket in full for a service, you may ask us not to share information about that service with your health plan for payment or health care operations, unless a law requires us to share it.

Right to an accounting of disclosures

You may ask for a list of certain disclosures we made of your information.

Right to receive a paper copy

You may ask for a paper copy of this notice at any time.

Right to choose someone to act for you

If you have given someone legal authority to act for you, or if someone is legally authorized to act for your baby or minor child, that person may exercise privacy rights for the relevant record. We may require documentation of legal authority before acting on the request.

Authorization revocation

You may revoke any authorization you give BCB at any time by sending written notice to the Privacy Officer. Revocation will not affect any use or disclosure already made in reliance on the authorization.

Your choices

You may tell us your preferences about certain disclosures. For example, you may tell us whether we may share information with a family member, support person, or other person involved in your care or payment. If you are not able to tell us your preference, we may share information if we believe it is in your best interest and allowed by law.

Complaints

You may file a complaint if you believe your privacy rights have been violated. Contact: Suzanne Juel, IBCLC, Privacy Officer, CEO@bayoucitybreastfeeding.com, 281-305-0411, 3007 Woodland Hills Dr., #98, Kingwood, TX 77339. You may also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights. We will not retaliate against you for filing a complaint.

Changes to this notice

We may change this notice. The revised notice will apply to information we already have and information we receive in the future. The current notice will be posted on our website and available on request.