

HIPPA FORM

This HIPAA Compliance Agreement ("Agreement") is made and entered into on [Date]_____ by and between Nicole McGlinchey CHN, hereinafter referred to as "Service Provider", and [Client Name]_____, hereinafter referred to as "Client".

Service Provider and Client agree to comply with the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") and its implementing regulations, including the Privacy Rule, Security Rule, and Breach Notification Rule, as applicable.

Protected Health Information ("PHI") is defined as individually identifiable health information that is transmitted or maintained in any form or medium, including electronic, paper, or oral communications.

Service Provider and Client acknowledge that PHI may be disclosed during the course of providing services, and that such disclosures may be necessary for treatment, payment, or healthcare operations.

Service Provider and Client agree to use and disclose PHI only as necessary to carry out treatment, payment, or healthcare operations, and in accordance with HIPAA requirements.

Service Provider and Client agree to implement reasonable and appropriate administrative, physical, and technical safeguards to protect the confidentiality, integrity, and availability of PHI.

Service Provider and Client agree to report any breaches of unsecured PHI to each other in accordance with HIPAA requirements.

Service Provider and Client agree to enter into a Business Associate Agreement ("BAA") if Service Provider is considered a Business Associate under HIPAA regulations.

Service Provider and Client acknowledge that this Agreement is not intended to create, nor does it create any third-party beneficiary rights.

This Agreement shall remain in effect for the duration of the business relationship between Service Provider and Client and for a period of 6 years following the termination of that relationship.
Signed:

Service Provider: Holsum Kitchen Holistic Health & Nutrition Nicole McGlinchey CHN

Date:

Client: [Client Name]_____

Date: