Notice of Privacy Practices
OC Hospice Care, Inc. · 19626 Ventura Blvd., Suite 225, Tarzana, CA 91356 · (747) 215-2070

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.

In short: we use your health information only to care for you, to bill your insurance, and to run our agency. We never sell it, never use it for marketing, and share it outside your care team only when the law allows or you tell us to. You can see your records, correct them, limit sharing, and complain ? to us or to the federal government ? without any fear of retaliation. The full notice below has the details.

a paper copy is available at our office at any time.

OC Hospice Care, Inc. ("we") is required by law to maintain the privacy and security of your protected health information, to give you this notice of our legal duties and privacy practices, and to follow the terms of the notice currently in effect. We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.

? Your rights

When it comes to your health information, you have certain rights. You can:

? Get a copy of your health and claims records. Ask us how; we will provide a copy or a summary, usually within 30 days of your request. We may charge a reasonable, cost-based fee.

? Ask us to correct records you believe are incorrect or incomplete. We may say no, but we'll tell you why in writing within 60 days.

? Request confidential communications ? ask us to contact you in a specific way (for example, home or office phone) or at a different address. We will accommodate all reasonable requests.

? Ask us to limit what we use or share. We may say no if it would affect your care. If you pay for a service fully out of pocket, you can ask us not to share that information with your health insurer for payment or operations, and we will agree unless a law requires the sharing.

? Get a list of those with whom we've shared your information (an "accounting of disclosures") for the six years before your request, excluding disclosures for treatment, payment, operations and certain others. One list per year is free.

? Get a paper copy of this notice at any time, even if you agreed to receive it electronically.

? Choose someone to act for you. A medical power of attorney or legal guardian can exercise your rights and make choices about your information; we confirm their authority before acting.

? File a complaint if you feel your rights are violated ? with us (contact below) or with the U.S. Department of Health and Human Services, Office for Civil Rights: 200 Independence Ave. S.W., Washington, D.C. 20201, phone 1-800-368-1019 (TDD 1-800-537-7697), or hhs.gov/ocr/complaints. We will never retaliate against you for filing a complaint.

? Your choices

Tell us what you want us to do in these situations, and we will follow your instructions:

? Sharing information with your family, close friends or others involved in your care, or in payment for your care.

? Sharing 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 when we believe it is in your best interest, or when needed to lessen a serious and imminent threat to health or safety.

Without your written authorization, we will never: sell your information; use or share it for marketing; or share psychotherapy notes. We do not use your information for fundraising.

? How we use and share health information

? To treat you. Our physicians, nurses, aides, social workers, chaplains and volunteers use your information to plan and provide hospice care, and we share it with other professionals involved in your care, such as your attending physician or a facility where you live.

? To run our organization. Quality review, staff training, and the administration of your care.

? To bill for your services ? to Medicare, Medi-Cal, your health plan or other payers.

? Public health and safety. Preventing disease, reporting adverse reactions or suspected abuse or neglect, and lessening serious threats to anyone's health or safety, as authorized by law.

? As required by law, including with the state licensing agency and the U.S. Department of Health and Human Services when they review our compliance.

? Coroners, medical examiners and funeral directors at or after a death, as permitted by law.

? Organ and tissue donation requests, where applicable.

? Legal proceedings and law enforcement ? in response to a court or administrative order, or in limited circumstances, a subpoena; and for workers' compensation claims or other government requests authorized by law.

? Research ? only with your authorization or when an oversight board has approved the use under strict legal protections.

? Changes to this notice

We can change this notice at any time; changes apply to all information we hold. The current notice is always available on this page, as a paper copy at our office, and is provided to every patient at admission.

? Contact / complaints

Privacy Officer, OC Hospice Care, Inc.19626 Ventura Blvd., Suite 225, Tarzana, CA 91356Phone: (747) 215-2070 · Email: contact@oc-hospice.com

Effective date: November 17, 2026.