

Notice of Privacy Practices

Sowa Holistic Therapy & Wellness LLC
Lori Smith, LICSW

Effective Date: May 15, 2026

This Notice of Privacy Practices describes how your protected health information (“PHI”) may be used and disclosed and how you can access this information. Please review it carefully.

At Sowa Holistic Therapy & Wellness LLC, your privacy is deeply important to us. We are committed to protecting the confidentiality of your personal and health information in accordance with the Health Insurance Portability and Accountability Act (HIPAA).

Your Protected Health Information (PHI)

Protected Health Information includes information about your mental health, medical history, treatment, payment information, and other identifying information related to your care.

How We May Use and Disclose Your Information

Your information may be used or disclosed for the following purposes:

Treatment

We may use your information to provide therapy services, coordinate care, or consult with other healthcare providers involved in your treatment when appropriate and authorized.

Payment

We may use or disclose your information to bill and receive payment from insurance companies or other third parties.

Healthcare Operations

We may use your information for administrative, quality assurance, licensing, supervision, legal compliance, and business operations.

Required by Law

We may disclose information when required by federal or state law, including:

- Suspected abuse or neglect
- Court orders or subpoenas
- Threats of serious harm to yourself or others
- Medical emergencies
- Public health reporting requirements

Appointment Reminders & Communication

We may contact you by phone, email, voicemail, or text message regarding appointments, scheduling, or practice-related communication unless you request otherwise.

Uses Requiring Your Written Authorization

Any use or disclosure of your information outside of the situations listed above requires your written authorization. You may revoke authorization at any time in writing.

Your Rights Regarding Your Health Information

You have the right to:

- Request access to your records
- Request corrections to your records
- Request restrictions on certain disclosures
- Request confidential communications
- Receive a copy of this Notice
- Request an accounting of disclosures
- File a complaint if you believe your privacy rights have been violated

Website & Electronic Communication

While efforts are made to maintain secure communication, email and electronic communication may carry privacy risks. Please avoid sending sensitive or urgent information through unsecured electronic communication unless otherwise discussed.

This website may use cookies or analytics tools to improve user experience and website performance. These tools do not collect confidential therapy information.

Complaints

If you believe your privacy rights have been violated, you may file a complaint with:

Sowa Holistic Therapy & Wellness LLC

Lori Smith, LICSW

Email: lori.smith.licsw@gmail.com

You may also file a complaint with the U.S. Department of Health and Human Services without fear of retaliation.

Changes to This Notice

We reserve the right to update this Notice of Privacy Practices at any time. Updated versions will be posted on this website with a revised effective date.

If you have questions about this Notice or your privacy rights, please contact:

Lori Smith, LICSW

Sowa Holistic Therapy & Wellness LLC

Email: lori.smith.licsw@gmail.com