

NOTICE OF PRIVACY PRACTICES

AlignedWest Chiropractic, LLC

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.

Effective Date: October 12, 2026

This Notice of Privacy Practices (“Notice”) applies to protected health information (“PHI”) maintained by AlignedWest Chiropractic, LLC (“AlignedWest,” “we,” “us,” or “our”). It explains how we may use and disclose your health information, your rights concerning that information, and our responsibilities under the Health Insurance Portability and Accountability Act (“HIPAA”) and other applicable law.

Your Rights - At a Glance

- Inspect or obtain a copy of your health information, with certain legal exceptions.
- Ask us to correct or amend health information you believe is incorrect or incomplete.
- Ask us to contact you in a specific way or at a different location.
- Ask us to limit certain uses or disclosures of your information.
- Request an accounting of certain disclosures of your information.
- Receive a paper copy of this Notice.
- Authorize someone with legal authority to act for you.
- Complain to us or to the U.S. Department of Health and Human Services if you believe your privacy rights were violated.

Your Rights

Access to your records

You may ask to inspect or receive an electronic or paper copy of health information we maintain about you that is subject to HIPAA’s right of access. We will respond within the time required by law. In most situations, HIPAA requires action within 30 days. We may charge a reasonable, cost-based fee when permitted by law.

Ask us to amend your information

If you believe health information we maintain about you is incorrect or incomplete, you may ask us to amend it. We may deny the request in circumstances permitted by law, but if we do, we will explain the denial in writing within the time required by law.

Request confidential communications

You may ask us to contact you in a particular way, such as only by a specific phone number, email address, or mailing address. We will accommodate reasonable requests.

Request restrictions

You may ask us not to use or disclose certain PHI for treatment, payment, or health care operations. We are generally not required to agree, except that if you pay for a health care item or service completely out of pocket, you may ask us not to disclose information about that item or service to your health plan for payment or health care operations, and we will honor the request unless disclosure is required by law.

Receive an accounting of disclosures

You may request a list of certain disclosures of your PHI made during the six years before your request. The accounting does not include every disclosure, such as many disclosures for treatment, payment, health care operations, or disclosures you specifically authorized. One accounting in a 12-month period will be provided without charge; a reasonable, cost-based fee may apply to additional requests when permitted by law.

Receive this Notice

You may request a paper copy of this Notice at any time, even if you previously agreed to receive it electronically.

Choose someone to act for you

If another person has legal authority to act as your personal representative, such as under a valid health care power of attorney or guardianship, that person may exercise your privacy rights as permitted by law. We may verify the person's authority before acting on a request.

File a complaint

You may complain to AlignedWest if you believe your privacy rights have been violated. 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.

Your Choices

For some disclosures, you may tell us your preferences. When permitted by law and appropriate to the circumstances, you may tell us whether we may share relevant information with family members, friends, caregivers, or others involved in your care or payment for your care. If you are unable to tell us your preference, we may disclose limited information when we determine that doing so is in your best interest or is needed to reduce a serious and imminent threat to health or safety.

Uses that generally require your written authorization

Except where HIPAA or another law permits otherwise, we will obtain your written authorization before using or disclosing PHI for marketing that requires authorization, before selling PHI, and before most uses or disclosures of psychotherapy notes if we ever maintain such notes. If you give us an authorization, you may revoke it in writing, except to the extent we have already acted in reliance on it.

Fundraising

AlignedWest does not currently use PHI for fundraising. If that practice changes, any fundraising communication using PHI will include the choices and protections required by law.

How We Typically Use or Disclose Your Health Information

Treatment

We may use and disclose your PHI to provide, coordinate, or manage your care. For example, we may share relevant information with another health professional involved in your treatment or receive information from another provider to help coordinate your care.

Payment

We may use and disclose PHI to obtain payment for services, process claims, determine benefits, collect balances, or perform related billing activities. For example, when we bill an insurer or another responsible payer, we may provide information needed to support the claim.

Health care operations

We may use and disclose PHI to operate the practice, improve quality, train and supervise staff, conduct compliance and risk-management activities, manage scheduling and communications, perform business planning, maintain records, and evaluate our services. We may use secure documentation and technology tools to help create, maintain, and manage clinical records.

Business associates

We may provide PHI to vendors or service providers that perform functions for AlignedWest and need the information to do that work, such as scheduling, electronic records, forms, payment processing, secure communications, information technology, or documentation support. When HIPAA requires it, we use a Business Associate Agreement that requires the vendor to appropriately safeguard PHI.

Appointment and service communications

We may use your contact information to communicate with you about appointments, forms, follow-up, services, care coordination, billing, or other practice-related matters. Some communications about our own health-related services may be permitted by HIPAA without a separate marketing authorization; when written authorization is legally required, we will obtain it.

Other Uses and Disclosures Permitted or Required by Law

HIPAA and other laws allow or require us to use or disclose PHI in certain additional circumstances. Depending on the facts and applicable legal requirements, these may include:

- Public health activities, such as reporting certain diseases, adverse events, or information required by public health authorities.
- Reporting suspected abuse, neglect, or domestic violence when authorized or required by law.
- Health oversight activities, audits, inspections, licensure, investigations, or other activities authorized by law.
- Workers' compensation or similar programs as authorized by law.
- Law-enforcement purposes when the legal requirements for disclosure are met.
- Judicial or administrative proceedings, including disclosures made in response to qualifying court orders, subpoenas, or other lawful process.
- Coroners, medical examiners, and funeral directors as permitted by law.
- Organ and tissue donation activities when applicable.
- Research when the requirements of HIPAA and other applicable law are satisfied.
- Preventing or reducing a serious and imminent threat to a person's or the public's health or safety, as permitted by law.
- Disclosures required by federal, state, or local law, including disclosures to the U.S. Department of Health and Human Services for HIPAA compliance activities.

Special Protection for Certain Substance Use Disorder Records

If AlignedWest receives or maintains substance use disorder patient records that are protected by 42 CFR Part 2, those records receive additional federal confidentiality protections. To the extent Part 2 applies, we will not use or disclose those records in civil, criminal, administrative, or legislative investigations or proceedings against you unless you give the consent required by law or the disclosure is authorized by an appropriate court order and subpoena or other process required by Part 2. If fundraising communications would use Part 2 information, you will receive the notice and choice required by law.

More Protective Laws

Some health information may be protected by federal or Utah law that is more restrictive than HIPAA. When another applicable law gives your information greater protection or imposes stricter limits on disclosure, AlignedWest will follow the more protective requirement.

Our Responsibilities

- We are required by law to maintain the privacy and security of PHI.
- We must follow the privacy practices described in the version of this Notice that is currently in effect.
- We will provide you with a copy of this Notice and make it available upon request.
- We will notify affected individuals as required by law if a breach of unsecured PHI occurs.
- We will not use or disclose PHI in a manner not described in this Notice unless you authorize it in writing or another law permits or requires the use or disclosure.
- We will take reasonable steps to limit uses, disclosures, and requests for PHI to the minimum necessary when the HIPAA minimum-necessary rule applies.

Changes to This Notice

We may change the terms of this Notice and may make the revised Notice effective for PHI we already maintain as well as PHI we receive in the future. When we make a material change, the revised Notice will be available at our office, upon request, and on our website.

Privacy Contact and Complaints

Privacy Contact	Weston Mark Sorenson, DC - Privacy Officer
Practice	AlignedWest Chiropractic, LLC
Address	3355 North University Avenue, Suite 175, Provo, UT 84604
Phone	(801) 658-9185
Email	admin@alignedwest.com

To file a privacy complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, you may use the OCR complaint process available through HHS. You will not be penalized or retaliated against for making a good-faith complaint.

Important Distinction

This HIPAA Notice of Privacy Practices explains how AlignedWest handles protected health information in connection with health care services. It is separate from AlignedWest's general website Privacy Policy, which addresses information collected through the website and online services more broadly.