

NOTICE OF PRIVACY PRACTICES

THIS NOTICE DESCRIBES HOW YOUR HEALTH INFORMATION MAY BE USED AND DISCLOSED AND HOW YOU CAN ACCESS THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

This Notice describes the privacy practices of **Align Mental Health LLC**. You may have additional rights under state or local law. If you have questions regarding your rights to health care information, you may wish to consult an attorney licensed in your state.

Effective Date of This Notice

This Notice is effective as of **2/8/2026**.

I. Our Pledge Regarding Health Information

We understand that health information about you and your health care is personal. We are committed to protecting your protected health information ("PHI"). We create and maintain records of the care and services you receive from this practice in order to provide you with quality care and to comply with legal requirements.

This Notice applies to all records of your care generated by this practice. It describes how we may use and disclose your health information, your rights regarding that information, and our obligations concerning its protection.

We are required by law to:

- Maintain the privacy of your PHI
- Provide you with this Notice of our legal duties and privacy practices
- Follow the terms of the Notice currently in effect

We reserve the right to change the terms of this Notice. Any changes will apply to all PHI we maintain. The revised Notice will be available upon request, in our office, and on our website.

II. How We May Use and Disclose Health Information About You

The following categories describe different ways we may use and disclose your health information. Not every possible use or disclosure is listed; however, all permitted uses and disclosures fall within these categories.

Treatment, Payment, and Health Care Operations

Federal privacy regulations allow health care providers who have a direct treatment relationship with a patient to use or disclose PHI without written authorization for treatment, payment, and health care operations.

Examples include:

- Consulting with other licensed health care providers regarding your care
- Coordinating and managing your treatment
- Referrals to other providers
- Billing, claims management, and practice operations
- Appointment reminders and administrative communications

Uses and disclosures for treatment purposes are **not limited** by the minimum necessary standard, as providers require full access to relevant information to provide appropriate care.

Lawsuits and Legal Proceedings

If you are involved in a lawsuit or legal proceeding, we may disclose PHI in response to a court or administrative order. We may also respond to subpoenas or lawful requests when permitted by law, provided that reasonable efforts have been made to notify you or to secure a protective order.

III. Uses and Disclosures That Require Your Written Authorization

Psychotherapy Notes

We maintain psychotherapy notes as defined by 45 C.F.R. § 164.501. Psychotherapy notes are kept separate from the medical record. Uses or disclosures of psychotherapy notes require your written authorization except when:

- Used for treatment by the originating provider
- Used for training or supervision of mental health practitioners
- Used to defend the practice in legal proceedings initiated by you
- Required by the Secretary of the U.S. Department of Health and Human Services
- Required by law
- Required for health oversight activities related to the originator of the notes

- Required by a coroner performing duties authorized by law
- Necessary to prevent or lessen a serious and imminent threat to health or safety

Marketing Purposes

We will not use or disclose your PHI for marketing purposes without your prior written authorization. If we request a review or testimonial and intend to use it for marketing or advertising, we will provide a HIPAA authorization for your signature. You may revoke this authorization at any time in writing. We cannot guarantee removal of information that has been copied or redistributed by third parties.

Sale of PHI

We do not sell your PHI.

IV. Uses and Disclosures That Do Not Require Your Authorization

Subject to legal limitations, we may use or disclose your PHI without authorization for the following purposes:

- Appointment reminders and information about treatment alternatives or related services
 - Disclosures required by federal or state law
 - Public health activities, including mandatory reporting of abuse or neglect
 - Health oversight activities such as audits and investigations
 - Judicial and administrative proceedings
 - Law enforcement purposes
 - Coroners or medical examiners
 - Research activities conducted in compliance with applicable laws
 - Specialized government functions
 - Workers' compensation claims, as permitted by law
 - Organ and tissue donation requests
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V. Uses and Disclosures Requiring an Opportunity to Object

We may share your PHI with family members, friends, or others involved in your care or payment for care unless you object. In emergency situations or when you are unable to object, disclosures may be made if they are in your best interest.

VI. Your Rights Regarding Your PHI

You have the right to:

- Request restrictions on certain uses and disclosures (we are not required to agree in all cases)
- Request restrictions on disclosures to health plans for services paid in full out-of-pocket
- Request confidential communications
- Inspect and obtain copies of your medical records, subject to limited exceptions
- Request amendments to your PHI
- Receive an accounting of disclosures
- Obtain a paper or electronic copy of this Notice
- Designate a personal representative
- Revoke authorizations in writing
- File a complaint without fear of retaliation

Requests must be submitted in writing. Timeframes and allowable fees are governed by applicable law.

VII. Complaints

If you believe your privacy rights have been violated, you may file a complaint with us or with the U.S. Department of Health and Human Services Office for Civil Rights.

Practice Contact / Privacy Officer:

Holly Montgomery, APRN, PMHNP-BC
Align Mental Health LLC
Phone: 402-364-1825
Address: 15808 W Dodge Road Ste 200
Omaha, NE 68118

HHS Office for Civil Rights:
200 Independence Avenue, S.W.
Washington, D.C. 20201
Phone: (877) 696-6775
Website: <https://www.hhs.gov/ocr/privacy/hipaa/complaints>

VIII. Changes to This Notice

We reserve the right to change the terms of this Notice. Any changes will apply to all PHI we maintain. Updated versions will be available upon request, in our office, and on our website.

Acknowledgment of Receipt

This Notice is available on our website and through our patient portal. You may be asked to acknowledge receipt of this Notice. If you choose not to acknowledge receipt, our good-faith effort to provide you with this Notice will still be documented.