NOTICE OF PRIVACY PRACTICES

Your Information.

Your Rights.

Our Responsibilities.

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.

Eventus WholeHealth
101 Cabarrus Avenue East
Suite 200
Concord, NC 28025
Telephone: 844.932.5700
Email: PrivacyOfficer@eventuswh.com

EFFECTIVE DATE: October 12, 2026

YOUR RIGHTS

When it comes to your health information, you have certain rights.
This section explains your rights and some of our responsibilities to help you.

Get an electronic or paper copy of your medical record	You can ask to see or get an electronic or paper copy of your medical record and other health information we have about you. Ask us how to do this. We will provide a copy or a summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee.
Ask us to correct your medical record	You can ask us to correct health information about you that you think is incorrect or incomplete. Ask us how to do this. We may say "no" to your request, but we'll tell you why in writing within 60 days.
Request confidential communications	You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address. We will say "yes" to all reasonable requests.
Ask us to limit what we use or share	You can ask us not to use or share certain health information for treatment, payment, or our operations. We are not required to agree to your request, and we may say "no" if it would affect your care. If you pay for a service or health care item out-of-pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer. We will say "yes" unless a law requires us to share that information.
Get a list of those with whom we've shared information	You can ask for a list (accounting) of the times we've shared your health information for six years prior to the date you ask, who we shared it with, and why. We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We'll provide one accounting a year for free but will charge a reasonable, cost-based fee if you ask for another one within 12 months.
Get a copy of this privacy notice	You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.
Choose someone to act for you	If you have given someone medical power of attorney or if someone is your legal guardian or if another person is authorized by law to make health care decisions for you, that person can exercise your rights and make choices about your health information. We will make sure the person has this authority and can act for you before we take any action.
File a complaint if you feel your rights are violated	You can complain if you feel we have violated your rights by sending a letter to Eventus WholeHealth, 101 Cabarrus Avenue East, Suite 200, Concord, NC 28025, calling 844.932.5700, or sending an email to PrivacyOfficer@eventuswh.com. You can also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting the Department of Health and Human Services website. We will not retaliate against you for filing a complaint.

YOUR CHOICES

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

In these cases, you have both the right and choice to tell us to:	• Share information with your family, close friends, or others involved in your care • Share information in a disaster relief situation *If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.*
In these cases, we never share your information unless you give us written permission:	• Marketing purposes • Sale of your information • Most sharing of psychotherapy notes

OUR USES AND DISCLOSURES

How do we typically use or share your health information?

We typically use or share your health information in the following ways.

Treat you	• We can use your health information and share it with other professionals who are treating you. **Example:** A doctor treating you for an injury asks another doctor about your overall health condition.
Run our organization	• We can use and share your health information to run our practice, improve your care, and contact you when necessary. **Example:** We use health information about you to manage your treatment and services.
Bill for your services	• We can use and share your health information to bill and get payment from health plans or other entities. **Example**: We give information about you to your health insurance plan so it will pay for your services.
Substance Use Disorder (SUD) Records	Eventus WholeHealth may receive or maintain certain health information related to the diagnosis, treatment, or referral for treatment of a substance use disorder ("SUD Records") that is subject to additional federal confidentiality protections under 42 C.F.R. Part 2. SUD Records are afforded heightened privacy protections and may be used or disclosed by Eventus WholeHealth only as permitted by applicable law, including with the patient's consent or as otherwise authorized or required by law. Part 2 is stricter than HIPAA in some respects. Where our use or disclosure of SUD Records requires your consent, you may give a single consent covering all future uses and disclosures for treatment, payment, and health care operations, and you may revoke your consent at any time, except to the extent we have already acted on it. SUD Records that we disclose as permitted by the HIPAA Privacy Rule may be redisclosed by the recipient and may no longer be protected by the Privacy Rule. If we use or disclose SUD Records for fundraising for our own benefit, we will first give you a clear and conspicuous opportunity to opt out of receiving fundraising communications, and we will honor your opt-out request.

How else can we use or share your health information?

We are allowed or required to share your information in other ways – usually in ways that contribute to the public good, such as public health and research. We must meet many conditions in the law before we can share your information for these purposes.

Help with public health and safety issues	• We can share health information about you for certain situations such as:
	  ○ Preventing disease
	  ○ Helping with product recalls
	  ○ Reporting adverse reactions to medications
	  ○ Reporting suspected abuse, neglect, or domestic violence
	  ○ Preventing or reducing a serious threat to anyone's health or safety

Do research	• We can use or share your information for health research.
Comply with the law	• We will share information about you if state or federal laws require it. • We will share information with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law.
Respond to organ and tissue donation requests	• We can share health information about you with organ procurement organizations.
Work with a medical examiner or funeral director	• We can share health information with a coroner, medical examiner, or funeral director when an individual dies.
Address workers' compensation, law enforcement, and other government requests	• We can use or share health information about you: o For workers' compensation claims o For law enforcement purposes or with a law enforcement official o With health oversight agencies for activities authorized by law o For special government functions such as military, national security, and presidential protective services
Respond to lawsuits and legal actions	• We can share health information about you in response to a court or administrative order, or in response to a subpoena. • Special Protections for SUD Records in Legal Proceedings: Notwithstanding the foregoing, SUD Records subject to 42 C.F.R. Part 2 may not be used or disclosed, and testimony relaying the contents of such records may not be given, in any civil, criminal, administrative, or legislative proceeding against the patient without the patient's specific written consent or a court order issued after notice and an opportunity to be heard is provided to you or the holder of the record, as provided in 42 C.F.R. Part 2. A court order authorizing use or disclosure must be accompanied by a subpoena or other legal requirement compelling disclosure before the record is used or disclosed.

Incidental disclosures: While we will take all reasonable steps to safeguard the privacy of your protected health information, certain disclosures of your information may occur during or as an unavoidable result of our otherwise permissible uses or disclosures of your information. For example, during a treatment session, other individuals in the treatment area or location of the treatment session may see your information or overhear a discussion regarding your information. These "incidental disclosures" are permissible.

Psychotherapy Notes: Psychotherapy notes are notes recorded by a health care provider who is a mental health professional documenting or analyzing the contents of a conversation during a private counseling session or a group, joint, or family counseling session and that are separate from the rest of the patient's medical record. Eventus WholeHealth treats psychotherapy notes differently from other mental health information both because they contain particularly sensitive information and because they are the personal notes of the therapist that typically are not required or useful for treatment, payment, or health care operations purposes, other than by the mental health professional who created the notes. Therefore, with few exceptions, Eventus WholeHealth will obtain a patient's authorization prior to a disclosure of psychotherapy notes for any reason, including a disclosure for treatment purposes to a health care provider other than the originator of the notes. A notable exception exists for disclosures required by other law, such as for mandatory reporting of abuse and mandatory "duty to warn" situations regarding threats of serious and imminent harm made by the patient (applicable State laws may vary as to whether such a warning is mandatory or permissible). Note: Psychotherapy notes are distinct from substance use disorder records that may be subject to 42 C.F.R. Part 2, and different legal standards may apply to the use and disclosure of each.

State Law: Some state laws give your health information more protection than federal law, for example laws about mental health, HIV and other communicable diseases, and substance use treatment records. When a state law is stricter than HIPAA, we follow the stricter law.

OUR RESPONSIBILITIES

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.

- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

Notification of a Breach
In the event of a breach of the privacy of your unsecured protected health information, you have a right to be notified in accordance with applicable law.

Changes to the Terms of This Notice
We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request and on our website.

How to File a Complaint
If you believe that your privacy rights have not been followed as directed by federal regulations and/or state law or as explained in this Notice, you may contact Eventus WholeHealth's Privacy Officer or the U.S. Department of Health and Human Services Office for Civil Rights to file a complaint. You will not be retaliated against or denied any health care services if you file a complaint.

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