



McCann Family Chiropractic

11605 State Avenue, Suite 111, Marysville, WA 98271
360-657-7183

NOTICE OF PRIVACY PRACTICES

Please review this notice carefully. It describes how your personal and medical information may be used and disclosed and how you may gain access to that information.

POLICY STATEMENT

At McCann Family Chiropractic (“MFC” or the “Practice”), we take privacy and security seriously. This Practice is committed to maintaining the privacy of your protected health information (“PHI”) and other data we may collect, which includes but is not limited to information about your medical condition and the care and treatment you receive from the Practice and other health care providers.

McCann Family Chiropractic’s Notice of Privacy Practices outlines how McCann Family Chiropractic and its affiliates (collectively “we,” “our,” or “us”) process the information we collect about you through various channels including intake paperwork, phone calls, our websites, mobile apps, emails, texts, and other online services (collectively the “Services”) and when you otherwise interact with us, such as through verbal communication. This Notice details how your PHI may be used and disclosed to third parties for purposes of your care, payment for your care, health care operations of the Practice, and for other purposes permitted or required by law. This Notice also details your rights regarding your PHI and other information we may collect.

We operate in the State of Washington which has comprehensive privacy legislation, and you may have additional rights with respect to your personal information. For further information regarding the personal data defined as “Consumer Health Data” according to Washington State My Health My Data Act (“MHMD”) and any other applicable regulations that govern state consumer health privacy. For Consumer Health Data and Washington state-specific privacy regulations, please refer to Sections 14 and 15 below.

TABLE OF CONTENTS

1. INFORMATION WE COLLECT AND HOW WE COLLECT IT
2. HOW WE USE YOUR INFORMATION
3. DISCLOSURES OF INFORMATION
4. THIRD-PARTY TRACKING AND ONLINE ADVERTISING
5. DO NOT TRACK
6. YOUR CONTROLS AND RIGHTS
7. DATA RETENTION
8. DATA SECURITY
9. INTERNATIONAL TRANSFER OF INFORMATION
10. CHANGES TO THIS POLICY.
11. HOW TO CONTACT US.
12. CONSUMER HEALTH DATA PRIVACY POLICY
13. PRACTICE’S REQUIREMENTS & PATIENT ACKNOWLEDGMENT

McCann Family Chiropractic

11605 State Avenue, Suite 111, Marysville, WA 98271

360-657-7183

1. INFORMATION WE COLLECT AND HOW WE COLLECT IT

Information You Provide

We collect information you provide when you use, or apply to use, our Services or otherwise engage or communicate with us as described below.

- Identity Data, such as your name, date of birth, marital status, social security number, photos of your face and government-issued identification documents, and other data on government-issued identification documents and insurance documents
- Medical History, such as your medical conditions, imaging, and chart notes
- Contact Data, such as your email address, mailing address, and telephone number
- Financial Data, such as your bank account and payment card details
- Profile Data, such as interests, preferences, feedback, and survey responses; and
- Additional Data You Provide, such as via phone calls, interaction at the front desk, customer support, or other means.

Other Information You Provide

We collect additional personal information that you choose to provide to us. You may also provide us with information about additional authorized users, including Identity Data, Contact Data, and Financial Data relating to them.

Information We Collect Automatically or Generate

We collect certain information about you automatically when you use our Services, as described below.

- Usage Information, such as information about your activity on our Services, which includes device identifiers (like IP address or mobile device identifiers), pages or features you use, time and date of access, and other similar usage information.
- Transactional Information, such as when you receive, submit, or complete a transaction via the Services, we collect information about the transaction, such as transaction amount, type and nature of the transaction, and time and date of the transaction.
- Location Data, as indicated by the GPS location of your mobile device in accordance with your device permissions. You can stop the collection of this precise location information at any time (see the Your Controls section below for details). We do not collect this data or use this data at our facility, but your device's apps collect and store this information (such as Google, Social Media Platforms, Email Carriers, etc.).

Information Collected Through Tracking Technologies

If you interact with us online via Facebook, our website, Google, or other search engines, we and our service providers use technologies, including cookies and web beacons, to automatically collect certain types of usage and device information when you use our Services or interact with our emails. The information collected through these technologies includes your IP address, browser type, internet service provider, platform type, device type, operating system, date and time stamp, a unique device or account ID, usage information and other similar information. For information about how to disable cookies, please see the Your Controls section below.

Information We Collect from Other Sources

McCann Family Chiropractic does not directly collect or interact with the information provided below. However, it is important you understand the complex way in which our digital information interacts and is harvested and stored through service providers such as Microsoft, Google, and Social Media platforms. "We" in this section refers to these online affiliates who also obtain information about you from other sources as described below.

- Inferred Data. Online sources may also infer information about your characteristics as a consumer, such as your likes, interests, and preferences.
- Connected Services. If you link, connect, or log in to your Account with a third-party service (e.g., Google, Apple), the third-party service may send us information such as your profile information from that service. This information varies and is controlled by that service or as authorized by you via your privacy settings at that service.
- Publicly Available Data. This may include contact information, your interactions with our social media platforms, and other information from publicly available sources, such as public websites.
- Advertising Data. We collect information in connection with our ad campaigns that surface on other platforms, such as the ads you click on and other interactions with our ads.

McCann Family Chiropractic

11605 State Avenue, Suite 111, Marysville, WA 98271

360-657-7183

2. HOW WE USE YOUR INFORMATION

We use the information we collect for purposes described below or as otherwise described to you at the point of collection:

- First and foremost, we are committed to providing you with excellent Chiropractic and healthcare services. The information we collect is used to provide you with the best care possible
- To maintain and provide the Services, including to process account information, authenticate your identity, support, process and record transactional information, and handle billing and account management;
- To send you transactional or relationship information, including confirmations, invoices, technical notices, customer support responses, software updates, security alerts, support and administrative messages, and information about your transactions;
- To communicate with you about offers and other things we think you will be interested in, such as newsletters, product announcements, partner offerings, surveys, contests or sweepstakes, events or announcements;
- To personalize our Services, such as by suggesting content or customizing content or ads we show you;
- To help protect the safety and security of our Services, business, and users, such as to investigate and help prevent fraud or other unlawful activity;
- To protect or exercise our legal rights or defend against legal claims, including to enforce and carry out contracts and agreements; and
- To comply with applicable laws and legal obligations, such as compliance obligations associated with being a healthcare provider

APPOINTMENT REMINDERS, RECEIPTS, TREATMENT ALTERNATIVES/BENEFITS, & OTHER

For your convenience, the Practice may contact you to provide appointment reminders, receipts, balances due notices, treatment options, or general practice information. These communications may be verbal or in the form of a text or email. The Practice will try to minimize the amount of clinical information contained in these communications. The Practice may also contact you by phone and, if you are not available, the Practice will leave a message for you.

During regular chiropractic adjustments, you will typically be seen in a room with a “semi-open” concept. We utilize half walls, and some conversation may be overheard during your adjustment. The semi-open concept is highly beneficial as it allows us to move through your appointment with ease and ensure you get quality, efficient care. If you are ever concerned with sharing any information which may be overheard, please let our front desk staff know prior to your appointment. We can easily accommodate a conversation in a more private area. If you realize you need to share confidential information during your appointment, simply ask Dr. Matt if you can discuss it privately. We are always happy to accommodate this request and can use the Exam Room (private) for an adjustment if needed. Your quality of care and your privacy are of utmost importance to our office and staff.

3. DISCLOSURES OF INFORMATION

We are committed to maintaining your trust, and we want you to understand when and with whom we disclose information about you. We disclose information about you in the instances described below.

- **Authorized vendors.** We disclose information about you with third party vendors and service providers who perform services for us, such as identification verification, fraud prevention, advertising, mailing services, information technology services, tax and accounting services, web hosting, and analytics services.
- **Banking and credit card.** When providing transactions through credit cards and bank accounts, we use this information to process your payment.
- **Affiliates.** Where appropriate, we disclose information about you to service providers who are essential to the operation of our business. These companies will process any information disclosed to them in the same manner as described under this Privacy Policy and are also subjected to the same stringent standards of both HIPAA and My Health My Data.
- **Substantial corporate transactions.** We may disclose information about you in connection with a substantial corporate transaction, a merger, consolidation, reorganization, financing, change in control or acquisition of all or a portion of our business by a third party, or in the unlikely event of a bankruptcy or similar proceeding.

McCann Family Chiropractic

11605 State Avenue, Suite 111, Marysville, WA 98271

360-657-7183

- **Legal purposes.** We disclose information about you if we believe that disclosure is in accordance with, or required by, any applicable law or legal process or to protect and defend the rights, interests, safety, and security of McCann Family Chiropractic, our users, or the public.
- **With your consent.** We disclose information about you for any other purposes disclosed to you with your consent.

USE OR DISCLOSURE OF PHI

The Practice may use and/or disclose your PHI for purposes related to your care, payment for your care, and health care operations of the Practice. The following are examples of the types of uses and/or disclosures of your PHI that may occur. These examples are not meant to include all possible types of use and/or disclosure.

- **Care.** In order to provide care to you, the Practice will provide your PHI to those health care professionals directly involved in your care so they may understand your medical condition and needs and provide advice or treatment. For example, your physician may need to know how your condition is responding to the treatment provided by the Practice.
- **Payment.** In order to get paid for some or all the health care provided by the Practice, the Practice may provide your PHI, directly or through a billing service, to appropriate third party payers, pursuant to their billing and payment requirements. For example, the Practice may need to provide your health insurance carrier with information about health care services you received from the Practice so the Practice may be properly reimbursed.
- **Health Care Operations.** For the Practice to operate in accordance with applicable law and insurance requirements and for the Practice to provide quality and efficient care, it may be necessary for the Practice to compile, use and/or disclose your PHI.

The following table is a list of the primary third party vendors we use to manage and process your data. Where necessary, a Business Associate Agreement is in place to ensure these companies will process your data according to HIPAA and MHMD laws.

Company Name/Category	Category of Data	Purpose
ChiroTouch	Electronic Medical and Health Records. Demographics, billing, imaging, and other data.	This is our primary Enterprise Resource Planning Software crucial to the function as a medical office including but not limited to tracking patient data, appointment scheduling, chart notes, billing, and communication.
Chiropractic Leadership Alliance	Exam diagnostic software and demographics	Facilitate patient exams and track progress
Medlink and Konica Minolta (20/20 Imaging)	Imaging Studies (X-Ray)	Imaging and evaluation services
Wells Fargo Merchant Services	Billing and demographics	Process over the counter credit and debit transactions
BlueFin Merchant Services	Billing and demographics	Process over the counter, stored, and website credit and debit transactions
Z Networks	Computer systems, server, and data	Information Technology service provider, anti-virus, and cloud backup storage
Office Ally	Billing	Claims clearinghouse used to process electronic claims for insurance companies
Insurance Companies and Online Portals	Billing	Processing insurance claims
Locum Tenens Doctor	All data within ChiroTouch software	Vacation and other office coverage
Dr. Susan Vlasuk, DC, DACBR	X-Ray imaging studies	Radiological consult

McCann Family Chiropractic

11605 State Avenue, Suite 111, Marysville, WA 98271

360-657-7183

AUTHORIZATION NOT REQUIRED

The Practice may use and/or disclose your PHI, without a written Authorization from you, in the following instances:

1. De-identified Information – Your PHI is altered so that it does not identify you and, even without your name, cannot be used to identify you.
2. Business Associate – To a business associate, who is someone the Practice contracts with to provide a service necessary for your treatment, payment for your treatment and/or health care operations (e.g., billing service or transcription service). The Practice will obtain satisfactory written assurance, in accordance with applicable law, that the business associate and their subcontractors will appropriately safeguard your PHI.
3. Personal Representative – To a person who, under applicable law, has the authority to represent you in making decisions related to your health care.
4. Public Health Activities – Such activities include, for example, information collected by a public health authority, as authorized by law, to prevent or control disease, injury or disability. This includes reports of child abuse or neglect.
5. Federal Drug Administration – If required by the Food and Drug Administration to report adverse events, product defects, problems, biological product deviations, or to track products, enable product recalls, repairs or replacements, or to conduct post marketing surveillance.
6. Abuse, Neglect or Domestic Violence – To a government authority, if the Practice is required by law to make such disclosure. If the Practice is authorized by law to make such a disclosure, it will do so if it believes the disclosure is necessary to prevent serious harm or if the Practice believes you have been the victim of abuse, neglect or domestic violence. Any such disclosure will be made in accordance with the requirements of law, which may also involve notice to you of the disclosure.
7. Health Oversight Activities – Such activities, which must be required by law, involve government agencies involved in oversight activities that relate to the health care system, government benefit programs, government regulatory programs and civil rights law. Those activities include, for example, criminal investigations, audits, disciplinary actions, or general oversight activities relating to the community's health care system.
8. Family and Friends - Unless expressly prohibited by you, the Practice may disclose PHI to a member of your family, a relative, a close friend, as it *directly* relates to that person's involvement in your health care. If you do not express an objection or are unable to object to such a disclosure, we may disclose such information, as necessary, if we determine that it is in your best interest based on our professional judgment. If any person other than you pays for your care, we may communicate with them regarding your appointments, bills, and account balances. This may include limited PHI such as would be shown on a statement but excludes detailed information such as chart notes.
9. Judicial and Administrative Proceeding – For example, the Practice may be required to disclose your PHI in response to a court order or a lawfully issued subpoena.
10. Law Enforcement Purposes – In certain instances, your PHI may have to be disclosed to a law enforcement official for law enforcement purposes. Law enforcement purposes include: (1) complying with a legal process (i.e., subpoena) or as required by law; (2) information for identification and location purposes (e.g., suspect or missing person); (3) information regarding a person who is or is suspected to be a crime victim; (4) in situations where the death of an individual may have resulted from criminal conduct; (5) in the event of a crime occurring on the premises of the Practice; and (6) a medical emergency (not on the Practice's premises) has occurred, and it appears that a crime has occurred.
11. Coroner or Medical Examiner – The Practice may disclose your PHI to a coroner or medical examiner for the purpose of identifying you or determining your cause of death, or to a funeral director as permitted by law and as necessary to carry out its duties.
12. Organ, Eye or Tissue Donation – If you are an organ donor, the Practice may disclose your PHI to the entity to whom you have agreed to donate your organs.
13. Research – If the Practice is involved in research activities, your PHI may be used, but such use is subject to numerous governmental requirements intended to protect the privacy of your PHI such as approval of the research by an institutional review board, the de-identification of your PHI before it is used, and the requirement that protocols must be followed. Individuals have the option to 'opt out' of certain types of research activities.

McCann Family Chiropractic

11605 State Avenue, Suite 111, Marysville, WA 98271

360-657-7183

14. Avert a Threat to Health or Safety – The Practice may disclose your PHI if it believes that such disclosure is necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public and the disclosure is to an individual who is reasonably able to prevent or lessen the threat.
15. Specialized Government Functions – When the appropriate conditions apply, the Practice may use PHI of individuals who are Armed Forces personnel: (1) for activities deemed necessary by appropriate military command authorities; (2) for the purpose of a determination by the Department of Veteran Affairs of eligibility for benefits; or (3) to a foreign military authority if you are a member of that foreign military service. The Practice may also disclose your PHI to authorized federal officials for conducting national security and intelligence activities including the provision of protective services to the President or others legally authorized.
16. Inmates – The Practice may disclose your PHI to a correctional institution or a law enforcement official if you are an inmate of that correctional facility and your PHI is necessary to provide care and treatment to you or is necessary for the health and safety of other individuals or inmates.
17. Workers' Compensation – If you are involved in a Workers' Compensation claim, the Practice may be required to disclose your PHI to an individual or entity that is part of the Workers' Compensation system.
18. Disaster Relief Efforts – The Practice may use or disclose your PHI to a public or private entity authorized to assist in disaster relief efforts.
19. Marketing - Face to face communication directly with the patient, treatment and coordination of care activities, or promotional gifts of nominal value do not require authorization as long as the Practice receives no financial remuneration for making the communication. All other situations require separate authorization.
20. Required by Law – If otherwise required by law, but such use or disclosure will be made in compliance with the law and limited to the requirements of the law.

AUTHORIZATION

Uses and/or disclosures, other than those described above, will be made only with your *written* Authorization. These authorizations may be revoked at any time; however, we cannot take back disclosures already made with your permission.

4. THIRD-PARTY TRACKING AND ONLINE ADVERTISING

Third party affiliates (such as Google, Social Media Platforms, various websites) may use advertising and analytics services to better understand your online activity and serve you targeted advertisements. These companies collect information about your use of our Services and other websites and online services over time through cookies, device identifiers, or other tracking technologies. The information collected includes your IP address, web browser, mobile network information, pages viewed, time spent, links clicked, and conversion information. This information is used to, among other things, analyze and track data, determine the popularity of content, and deliver advertisements targeted to your interests on our Services and other platforms, as well as to provide advertising-related services to us such as reporting, attribution, analytics, and market research.

For more information about interest-based ads, including learning about opting out of having your web browsing information used for targeted advertising purposes, please visit <http://www.aboutads.info/choices>. You should also review your mobile device settings and controls for features that allow you to opt out or opt in to having certain information collected for behavioral advertising purposes.

The following table is a sample of how your data may be shared with online third parties:

Company Name	Category of Data	Purpose
Microsoft	Email address and similar contact info	Email communication
Facebook	Public Profile Data	Office communications, special events, offers, closures, etc.
Google or Other Search Engine	Search Engine	Finding a Chiropractic Office
Weebly/Square Inc.	Website hosting service	Office Information

McCann Family Chiropractic

11605 State Avenue, Suite 111, Marysville, WA 98271

360-657-7183

Please see the privacy policies of the above listed companies to learn of their privacy practices. We do not directly control the privacy practices of these large companies that we use for basic office functions.

5. DO NOT TRACK

Some web browsers transmit “do-not-track” signals to websites. We currently don’t act in response to these signals.

6. YOUR CONTROLS AND RIGHTS

You can stop receiving promotional emails from us by clicking the “unsubscribe” link in those emails. We may still send you service-related or other non-promotional communications, such as account notifications, receipts, security notices and other transactional or relationship messages.

Cookie controls. Many web browsers are set to accept cookies and similar tracking technologies by default. If you prefer, you can set your browser to delete or reject these technologies. If you choose to delete or reject these technologies, this could affect certain features of our Services. If you use a different device, change browsers, or delete the opt-out cookies that contain your preferences, you may need to perform the opt-out task again.

You have the right to:

- Revoke any Authorization, in writing, at any time. To request a revocation, you must submit a written request to the Practice’s Privacy Officer.
- Request restrictions on certain use and/or disclosure of your PHI as provided by law. However, the Practice is not obligated to agree to any requested restrictions. To request restrictions, you must submit a written request to the Practice’s Privacy Officer. In your written request, you must inform the Practice of what information you want to limit, whether you want to limit the Practice’s use or disclosure, or both, and to whom you want the limits to apply. If the Practice agrees to your request, the Practice will comply with your request unless the information is needed in order to provide you with emergency treatment.
- Receive confidential communications of PHI by alternative means or at alternative locations. You must make your request in writing to the Practice’s Privacy Officer. The Practice will accommodate all reasonable requests.
- Inspect and copy your PHI as provided by law. To inspect and copy your PHI, you must submit a written request to the Practice’s Privacy Officer. In certain situations that are defined by law, the Practice may deny your request, but you will have the right to have the denial reviewed. The Practice may charge you a fee (to cover costs incurred by the Practice to reproduce records) for the cost of copying, mailing or other supplies associated with your request.
- Amend your PHI as provided by law. To request an amendment, you must submit a written request to the Practice’s Privacy Officer. You must provide a reason that supports your request. The Practice may deny your request if it is not in writing, if you do not provide a reason in support of your request, if the information to be amended was not created by the Practice (unless the originating individual or entity that created the information is no longer available), if the information is not part of your PHI maintained by the Practice, if the information is not part of the information you would be permitted to inspect and copy, and/or if the information is accurate and complete. If you disagree with the Practice’s denial, you have the right to submit a written statement of disagreement.
- Receive an accounting of non-routine disclosures of your PHI as provided by law. To request an accounting, you must submit a written request to the Practice’s Privacy Officer. The request must state a time period which may not be longer than six years and may not include the dates before April 14, 2003. The request should indicate in what form you want the list (such as a paper or electronic copy). The first list you request within a 12 month period will be free, but the Practice may charge you for the cost of providing additional lists in that same 12 month period. The Practice will notify you of the costs involved and you can decide to withdraw or modify your request before any costs are incurred.
- Receive a paper copy of this Notice of Privacy Practices from the Practice upon request.
- To file a complaint with the Practice, please contact the Practice’s Privacy Officer. All complaints must be in writing. If your complaint is not satisfactorily resolved, you may file a complaint with the Secretary of Health and Human Services, Office for Civil Rights. Our Privacy Officer will furnish you with the address upon request.

McCann Family Chiropractic

11605 State Avenue, Suite 111, Marysville, WA 98271

360-657-7183

Data Subject Access Request ("DSAR")

You have a legal right to access your personal data stored by McCann Family Chiropractic and its affiliates. You may submit a DSAR by emailing monica@mfcwellness.com with "DSAR" in the subject line. We will respond to the DSAR within 30 days of receipt of the request.

7. DATA RETENTION

We will retain your information for as long as it is needed to provide you with your services, and as necessary to comply with our legal obligations, resolve disputes, and enforce our agreements. We reserve the right to retain data longer than is required, however we will delete this data if it is requested and outside of the bounds of legal and/or other requirements.

8. DATA SECURITY

We strive to make certain that our servers and connections incorporate the latest encryption and security devices. We have implemented physical, electronic, and managerial procedures to safeguard and secure the information we collect. Sensitive and personal information are transmitted by secure servers (SSL). Unfortunately, no data transmission is guaranteed to be 100% secure and we therefore cannot guarantee the security of information you transmit to or from us, and you provide this information at your own risk. ACCORDINGLY, WE DISCLAIM LIABILITY FOR THE THEFT, LOSS, OR INTERCEPTION OF, OR UNAUTHORIZED ACCESS OR DAMAGE TO, YOUR DATA OR COMMUNICATIONS BY USING OUR SERVICES. YOU ACKNOWLEDGE THAT YOU UNDERSTAND AND ASSUME THESE RISKS.

IF YOU BELIEVE YOUR PRIVACY HAS BEEN BREACHED THROUGH USE OF OUR WEBSITE, APPLICATIONS, OR OTHER SERVICES PLEASE CONTACT US IMMEDIATELY AT mfcadmin@mfcwellness.com.

9. INTERNATIONAL TRANSFER OF INFORMATION

If you do not reside in the United States and provide personal information to us, it will be transferred, processed, collected, used, accessed and/or stored in the United States and subject to U.S. laws. These laws, wherever applicable, may not provide the same protection for your personal information as the jurisdiction in which you reside. Do not provide your Personal Information to us if you do not consent to this information to be transferred or processed outside of your country of residence.

10. CHANGES TO THIS POLICY

This Privacy Policy will evolve with time, and when we update it, we will revise the "Effective Date" below and post the new Policy and, in some cases, we provide additional notice (such as adding a statement to our website or sending you a notification). To stay informed of our privacy practices, we recommend you review the Policy on a regular basis as you continue to use our Services.

11. HOW TO CONTACT US

To obtain more information, or have your questions about your rights answered, please contact the Practice's Privacy Officer:

Monica McCann monica@mfcwellness.com (360) 657-7183
11605 State Avenue, Suite 111
Marysville, WA 98271

12. CONSUMER HEALTH DATA PRIVACY POLICY

This Section applies to personal data defined as "Consumer Health Data" according to the Washington State My Health My Data Act ("MHMD") and any other applicable regulation that governs state consumer health privacy.

McCann Family Chiropractic

11605 State Avenue, Suite 111, Marysville, WA 98271

360-657-7183

Consumer Health Data We Collect

Similar to the above-described types of information we collect, the consumer health data we may collect will depend on your interaction with McCann Family Chiropractic and the choices you make or the products and services you use. The definition of Consumer Health Data under MHMD is broad and many of the above-described categories of information we collect could also fall under this broad definition.

This may include the following:

- Information about health-related conditions, including symptoms, diagnoses, testing, or treatments.
- Measurements of bodily functions, including vital signs, characteristics or likeness (which may also be considered biometric information under MHMD or another state-specific consumer health regulation).
- Precise or approximate geolocation that could be reasonably linked to receiving health services or supplies.
- Information that could identify an attempt to seek healthcare services or further information about a particular healthcare service.
- Information that alone, or in the aggregate, could be used to infer or derive data related to healthcare services or healthcare information.

Sources of consumer health data

We may collect consumer health data from you, from your interactions with our products and services, from third parties, and from publicly available sources.

Purpose for collection and use of consumer health data

Our purpose for collecting and use of consumer health data is described above in Section 2 above. Generally speaking, McCann Family Chiropractic will collect and use your consumer health data to the extent that it is reasonably necessary to provide you with the products or services you have requested. In addition, we may use your consumer health data for other purposes such as marketing and advertising ONLY AFTER we obtain your consent, which you may revoke at any time. Please refer to Section 6 for additional information on how to exercise your rights. You may also contact McCann Family Chiropractic at mfcadmin@mfcwellness.com.

How we share your consumer health data

We share your consumer health data with your consent or as reasonably necessary to provide you with the products or services you request or to complete a transaction (such as payment processing or fraud prevention). We share your data with the following types of third parties:

- Service Providers. We share your consumer health data with vendors or other service providers working for us as described above. This includes, for example, payment processors, customer support, or services that assist us in cybersecurity.
- With relevant parties in the event of a merger or acquisition.
- Affiliates. We share your consumer health data with our affiliates and subsidiaries.
- Government Agencies. We will disclose your consumer health data with government agencies only when necessary to comply with applicable law or to respond to a legitimate law enforcement request.

Your rights under MHMD and related consumer health privacy regulations

Certain U.S. states empower individuals with certain rights regarding their consumer health data. These rights include the right to access, the right to delete, the right to correct, and in some cases, the right to withdraw consent relating to processing of this data. To exercise any or all of these rights, please contact McCann Family Chiropractic at mfcadmin@mfcwellness.com.

If your request to exercise your rights is denied, you may appeal that decision by contacting us. You may also raise concerns or file a complaint with your state's Attorney General.

McCann Family Chiropractic

11605 State Avenue, Suite 111, Marysville, WA 98271

360-657-7183

13. PRACTICE'S REQUIREMENTS & PATIENT ACKNOWLEDGMENT

McCann Family Chiropractic:

- Is required by law to maintain the privacy of your PHI and to provide you with this Notice of Privacy Practices upon request.
- Is required to abide by the terms of this Notice of Privacy Practices.
- Reserves the right to change the terms of this Notice of Privacy Practices and to make the new Notice of Privacy Practices provisions effective for all of your PHI that it maintains.
- Will not retaliate against you for making a complaint.
- Must make a good faith effort to obtain from you an Acknowledgment of receipt of this Notice.
- Will post this Notice of Privacy Practices in its lobby and on the Practice's web site.
- Will inform you in a timely manner, if there is a case of a breach of unsecured health information.

PATIENT ACKNOWLEDGMENT

I acknowledge I have received and read the Notice of Privacy Practices.

Name

Date

Signature

Relationship to Patient (if patient is a minor or not able to sign)