



NOTICE OF PRIVACY PRACTICES

Effective Date: July 24, 2025

This notice describes how medical and dental information about you may be used and disclosed, and how you can get access to this information. Please review it carefully.

Our Commitment to Your Privacy

We are committed to protecting the privacy of your Protected Health Information (PHI). This Notice explains how we may use and disclose your health information and outlines your rights regarding your information.

How We May Use and Disclose Your Health Information

We are permitted by law to use and disclose your PHI for the following purposes without your written authorization:

- ❖ **Treatment:** We may use or disclose your health information to provide you with dental or medical treatment or services. This includes communication with specialists, physicians, labs, pharmacies, or family members involved in your care (as approved by you).
- ❖ **Payment:** We may use or disclose your health information to bill and collect payment from you, your insurance company, or a third party. For example, we may share information with your dental plan to determine eligibility or coverage.
- ❖ **Healthcare Operations:** We may use or disclose your information for the purpose of running our practice, such as reviewing the quality of care, staff training, legal or accounting reviews, and administrative activities.

Uses and Disclosures That Require Your Authorization

We will not use or disclose your health information for the following purposes without your written authorization:

- Marketing communications
- Sale of PHI
- Use of psychotherapy notes (if applicable)

You may revoke your authorization in writing at any time, except to the extent that we have already taken action based on it.

Other Permitted or Required Uses and Disclosures

We may also use or disclose your health information in the following situations as permitted or required by law:

- Public health and safety (e.g., disease reporting, product recalls)
- Reporting abuse, neglect, or domestic violence
- Health oversight activities (e.g., audits, investigations)
- Legal and administrative proceedings (e.g., in response to a subpoena or court order)
- Law enforcement purposes
- Organ and tissue donation
- Research (under strict protocols)
- Workers' compensation
- Coroners, medical examiners, or funeral directors
- National security or military activities
- As required by state or federal law

Appointment Reminders & Communications

We may use or disclose your information to remind you of upcoming appointments or to share information about your care. This may include phone calls, text messages, voicemails, letters, emails, or secure patient portals.

Your Rights Regarding Your Health Information

You have the following rights regarding the PHI we maintain about you:

1. Right to Access

You have the right to inspect and receive copies of your PHI, including electronic records. Requests must be made in writing. We will respond within 30 days (or sooner as required by state law).

2. Right to Amend

If you believe the information we have about you is incorrect or incomplete, you may request an amendment in writing. We may deny the request under certain circumstances, but we'll always explain our decision in writing.

3. Right to an Accounting of Disclosures

You may request a list of certain disclosures we have made of your health information in the past six years. This right excludes disclosures for treatment, payment, and healthcare operations.

4. Right to Request Restrictions

You have the right to request that we limit the use or disclosure of your PHI. While we are not required to agree to all requests, we will comply if the restriction is required by law.

5. Right to Request Confidential Communications

You may request that we communicate with you in a specific way (e.g., only by mail or at a certain phone number). We will accommodate all reasonable requests.

6. Right to a Copy of This Notice

You may request a paper or digital copy of this Notice at any time.

7. Right to File a Complaint

We support your right to the privacy of your health information. If you believe your rights have been violated, you may file a complaint with our Privacy Officer or with the U.S. Department of Health and Human Services. We will not retaliate against you for filing a complaint.

Our Duties

We are required by law to:

- Maintain the privacy and security of your PHI
- Provide you with this Notice of our legal duties and privacy practices

- Abide by the terms of the current version of this Notice
- Notify you in the event of a breach of your unsecured PHI

To contact the Privacy Officer, please call or email the office and ask to speak with the Office Manager, who also serves as the designated Privacy Officer.

Changes to This Notice

We reserve the right to update or change this Notice at any time. The revised Notice will apply to all PHI we maintain and will be posted in our office and on our website. You may request a current copy at any time.