

## NOTICE OF PRIVACY PRACTICES FOR PROTECTED HEALTH INFORMATION

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.**

The Health Insurance Portability Act of 1996 ("HIPAA") is a federal program that requires that all medical records and other individually identifiable health information used or disclosed by us in any form, whether electronically, on paper, or orally, are kept properly confidential. This Act gives you, the patient, significant new rights to understand and control how your health information is used. HIPAA provides penalties for covered entities that misuse personal health information.

As required by HIPAA, we have prepared this explanation of how we are required to maintain the privacy of your health information and how we may use and disclose your health information.

We may use and disclose your medical records for each of the following purposes: treatment, payment and health care operations.

- **Treatment** means providing, coordinating, or managing your dental care. This includes sharing information with other health care providers involved in your treatment.
- **Payment** means obtaining reimbursement for services provided to you. This may include disclosure to insurance companies, billing services, or collection agencies.
- **Health care operations** include the business aspects of running our practice, such as conducting quality assessment, staff training, licensing, auditing functions, cost-management analysis, and customer service.

### **Substance Use Disorder (SUD) Records — Special Privacy Protections**

In some situations, we may receive or maintain **substance use disorder (SUD) treatment records** that are subject to **additional federal confidentiality protection under 42 CFR Part 2**.

When applicable:

- SUD records are afforded **heightened privacy protections** beyond standard HIPAA rules.
- These records may be used or disclosed for treatment, payment, and health care operations **only as permitted by law**.
- SUD records **will not be used or disclosed in civil, criminal, administrative, or legislative proceedings against you** without your written consent or a court order issued after notice to you.
- Redisclosure of SUD records may be restricted even when other health information may be shared.

We comply with all applicable federal and state laws that provide greater privacy protection for SUD and other sensitive health information.

### **Other Permitted or Required Uses and Disclosures**

We may use or disclose your health information without your authorization in certain circumstances, including:

- **As required by law**
- **Workers' Compensation**
- **Public Health Activities**
- **Health oversight activities**

- **Abuse, Neglect, or Domestic Violence Reporting**
- **Correctional Institutions**
- **Law Enforcement Purposes**
- **Judicial and Administrative Proceedings**
- **To avert a serious threat to health or safety**

Other uses and disclosures besides those identified in this Notice will be made only with your written authorization. You may revoke such authorization except to the extent that we have already acted, relying on your authorization.

### **Your Rights**

You have the following rights with respect to your protected health information, which you can exercise by presenting written request to the Privacy Officer:

- **Request Restrictions:** the right to request restrictions on certain uses and disclosures of protected health information, including those related to disclosures to family members, other relatives, close personal friends, or any other person identified by you. We are however, not required to agree to the requested restriction. If we do agree to a restriction, we must abide by it unless you agree, in writing, to remove it.
- **Request Confidential Communications:** the right to receive confidential communications of protected health information from us by alternative means or at alternative locations.
- **Access Your Records:** The right to inspect and copy your protected health information.
- **Request Corrections:** The right to amend protected your health information.
- **Receive an Accounting of Disclosures:** The right to receive an accounting of disclosures of your protected health information
- **Obtain a Paper Copy of This Notice:** The right to obtain a paper copy of the notice from us upon request, even if you have agreed to receive the notice electronically.

### **Our Responsibilities**

We are required by law to maintain the privacy and security of your protected health information, to provide you with notice of our legal duties and privacy practices with respect to protected health information, follow the terms of this Notice, and to promptly notify you if a breach occurs that may have compromised the privacy or security of your information.

This notice is effective as of February 8<sup>th</sup>, 2026. We are required to abide by the terms of the Notice of Privacy Practices currently in effect. We reserve the right to change the terms of our Notice of Privacy Practices and to make the new notice provisions effective for all protected health information that we maintain. We will post a copy of the current version in the waiting area (lobby) as well as on our website. You may also request a written copy from the office.

### **Complaints**

You have recourse if you feel that your privacy protections have been violated. You have the right to file a formal, written complaint with our Privacy Officer or with the U.S. Department of Health and Human Services Office for Civil Rights (address below) about violations of the provisions of this notice. We will not retaliate against you for filing a complaint.

If you have questions, would like additional information, or want to report a problem regarding the handling of your information, you may contact our HIPAA Privacy Officer at 806-358-2472 or the U.S. Department of Health & Human Services using the contact information below.

The U.S. Department of Health & Human Services  
Office of Civil Rights  
200 Independence Avenue, S.W.  
Washington, D.C. 20201

Toll free: 1-877-696-6755