

UNIVERSAL SMILES...GIVING ALL KIDS A SMILES

NOTICE OF PRIVACY PRACTICES

THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. THE PRIVACY OF YOUR HEALTH INFORMATION IS IMPORTANT TO US.

Universal Smiles uses health information about you for treatment, to obtain payment for treatment, for administrative purposes and to evaluate the quality of care that you receive. We are required by law to maintain the privacy of your health information. We are also required to provide you with a copy of our privacy practices. We are required to abide by the terms of this notice and also to notify you if we are unable to agree to a requested restriction on how your information is used. We reserve the right to amend our privacy practices at any time provided that we make the new notice available upon request.

USES AND DISCLOSURES OF YOUR HEALTH INFORMATION

For treatment. We may use your health information to provide you with dental treatment or services. We may also disclose your information to another healthcare provider providing you with treatment.

For payment. We may use and disclose your health information to others for purposes of receiving payment for services that you receive.

For healthcare operations. We may use and disclose health information about you for operational purposes such as evaluation of our staff, assessment of the quality of care and to determine how to continually improve the quality and effectiveness of the services that we provide.

For appointments. We may use your information to provide appointment reminders.

Required by law. We may use and disclose your information when we are required to do so by law.

Public Health. Your health information may be used or disclosed for public health activities such as assisting public health authorities in the prevention or control of disease.

Health and Safety. Your health information may be disclosed to avert a serious threat to the health or safety of you or any other person.

YOUR HEALTH INFORMATION RIGHTS

You have the right to

- request a restriction on certain uses and disclosures of your information; however we are not required to agree to a requested restriction
- obtain a paper copy of the notice of information practices upon request
- inspect and obtain a copy of your health record by providing us with a written and signed request
- request in writing, with explanation, that we amend your health record; we have the right to deny your request
- receive an accounting of disclosures made of your health information
- revoke your authorization to use or disclose health information except to the extent that action has already been taken

COMPLAINTS

You may complain to Universal Smiles and the Department of Healthcare and Family Services if you believe your privacy rights have been violated. You will not be retaliated against for filing a complaint.

CONTACT INFORMATION

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