Notice of Privacy Practices

Smart Smile Dentistry

PRIVACY and SECURITY

Our practice’s Privacy and security practices are derived from the Department of Health and Human Services regulations, which were implemented in 2003 and include the omnibus updates that went into effect as of September 18, 2003. We are required to keep your personal and health information secure and confidential at all times. A copy of our privacy practices is available at our reception desk.

Your personal and health information will never be used nor disclosed except for the provisions listed in this notice, except with your written permission.

You may request that we not use nor disclose some or all of your information as described in this notice. This request must be in writing and we will promptly advise you if we are able to fulfill your request. We are allowed to use or disclose your personal information in normal and customary manners such as with other Healthcare Providers involved with your treatment. We may also use and disclose your information for payment for services with insurance companies to include but not limited to reports on your treatment and progress. We may use your information with our Business Associates such as Labs and billing companies, all of which we have a written contract with to protect and keep your private information secure and confidential. We may contact you or your assigned designee about treatment follow up, account information, newsletters or other information by phone, text, email or mail. If you do not answer the phone, we may leave a message for you on your answering machine, voicemail or with whomever answers the phone number you provide us with. In an emergency, we may disclose your health information with your family, a designee or other persons responsible for your care. We will release some or all of your personal and health information when required by law.

Patient Rights

You have the right to know of any use or disclosure of your information other than normal and customary, should they occur. You have the right to receive a copy of this notice and it is always available at our reception desk. You have the right to review and obtain a copy of your health information, with few exceptions. If you would like a copy of this information, please submit a request in writing for the specific information you would like. You have the right to have a copy of your records transferred to another practice. Notify us in writing of where you would like this information sent. You have the right to request, in writing, an amendment or change to your health information or for a statement to be added to your file. We may or may not be able to make a change you request but will include your statement in your records. You have the right to know if our privacy and security measures or systems are ever breached and be notified. If we change any of the details of this Notice, we will post the new Notice prominently in our practice location and on our website with a copy available upon request.

Please contact our onsite privacy officer to make a request, to file a compliment or complaint with us or for more information regarding our security and privacy policies.