

**PRIVACY POLICY:** *This notice describes how your protected dental and health information may be used and disclosed by Boulder Holistic Dentistry's office, and how you may gain access to this information. Please review it carefully.*

### **I. Uses and Disclosures of Health Information.**

The Dental Office may release your protected health information without authorization for treatment, payment, and health care operations. Some examples of such purposes are:

- *Sharing your diagnostic information with other health care providers for confirmation of a diagnosis or consultation on your treatment plan;*
- *Providing your diagnosis or other health care information to your insurance provider to obtain payment for the services we provide.*

The Dental Office may also use or disclose your protected dental and health information, in compliance with guidelines outlined by law, for the following purposes:

- *Providing you with information about your health;*
- *Contacting you regarding appointments, information about treatment alternatives, or other health related services;*
- *For appointment purposes, patient names are listed on a scheduling screen in treatment rooms;*
- *Incidental uses or disclosures (e.g. your name visible on a folder, etc.);*
- *Compliance with all laws, including reporting of suspected abuse, neglect, or violence;*
- *Public health activities, judicial proceedings, specific law enforcement activities;*
- *Informing a family member, other relative, or close personal friend when information is relevant to the individual's involvement with your care, or to assist in your health care (e.g. pick up prescriptions, note follow-up care instructions, etc.).*

The Dental Office will make other uses and disclosures of your protected dental and health information only after obtaining your written consent. If you authorize a use not included in the above list, you may revoke your consent at any time by written notice.

### **II. Your rights regarding the privacy of your health information.**

Subject to limitations outlined by law, you have certain rights related to the use and disclosure of your protected health information, including the right to:

- *Request restrictions on certain uses and disclosures – however, the Dental Office is not obligated to agree to requested restrictions;*
- *Receive communication of protected health information in a confidential manner;*
- *Amend your health information;*
- *Receive an accounting of disclosures of your health information*
- *Obtain a copy of this notice.*

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**III. Dental Office duties regarding the privacy of your dental and health information.**

Subject to limitations outlined by law, the Dental Office has certain duties related to your protected health information, including:

- *To maintain the privacy of protected health information, and to provide individuals notice of our legal duties and privacy policies;*
- *To abide by the terms of the privacy policy currently in effect;*
- *The Dental Office reserves the right to change a privacy policy practice described in this notice, and to make such a change effective for all protected health information. A copy of the revised notice will be posted in our office, and will be made available on request*

**IV. Complaints**

If you think your privacy rights have been violated, you may file a complaint with Dr. Mustian at the Dental Office, 2006 Broadway, Boulder, CO 80302, (303) 443-4984, or you may contact the Secretary of Health and Human Services, 200 Independence Ave. SW, room 509F HHH Building, Washington, DC, 20201.

No individual will be retaliated against for filing a complaint.

In effect September, 2014.