

Notice of Privacy Practices

HOLLAND ROOT CANAL SPECIALISTS

THIS NOTICE DESCRIBES HOW HEALTH 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 and Accountability Act of 1996 (HIPAA) requires that health providers keep your medical and dental information private. The HIPAA Privacy Rule states that health providers must also post in a clear and prominent location and provide patients with a written Notice of Privacy Practices.

The privacy practices described are currently in effect. We reserve the right to change our privacy practices, and the terms of this Notice, at any time, provided such changes are permitted by law. If changes are made, a new Notice of Privacy Practices will be displayed in our office and provided to patients. You may request a copy of our Notice at any time. Additional information may be obtained from the HIPAA Coordinator listed in our written HIPAA Plan.

USES AND DISCLOSURES OF HEALTH INFORMATION

The following describes how information about you may be used in this dental office.

- **Treatment Services:** We may use or disclose your health information to our staff members, other dentists, your physicians, and or other health care providers providing treatment.
- **Payment and Health Care Operations:** We may use or disclose your health information to obtain payment for services we provide to you.
- **Marketing:** We will not use your health information for marketing purposes, uses or disclosures that constitute a sale of protected health information without your written consent.
- **Special Confidentiality Protections:** Some information, such as HIV-related information, genetic information, alcohol and/or substance use treatment records, and mental health records may be entitled to special confidentiality protections under applicable state or federal law. We will abide by these special protections as they pertain to applicable cases involving these types of records. In no event will we use or disclose your information, or testimony that describes the information contained in your record, in any civil, criminal, administrative, or legislative proceedings by any Federal, State, or local authority, against you, unless authorized by your consent or the order of a court after it provides you notice of the court order.
- **Appointment Reminders:** We may use or disclose your health information to provide you with appointment reminders such as voicemail messages, email, postcards, letters, or text messages.
- **Legal Requirements:** We may disclose your health information when required to do so by law.
- **Abuse or Neglect:** If abuse or neglect is reasonably suspected, we may use or disclose your health information to the appropriate governmental authorities.
- **National Security:** When required, we may disclose military personnel health information to the Armed Forces. Information may be given to authorized federal officials when required for intelligence and national security activities. Health information for inmates in custody of law enforcement may also be provided to correctional institutes.
- **Family Members, Friends, and Others Involved in Care:** With your consent, we may disclose your health information to a family member or other person if necessary to assist with your treatment and/or payment for services. Based on our judgment and as per 164.522(a) if HIPAA we may disclose your information to these persons in the event of an emergency. We will also use our professional judgement and experience with common practice to make reasonable inferences of your best interest in allowing a person to pick up filled prescriptions, medical supplies, x-rays, or other similar forms of health information.
- **Business Associates:** Some services in our organization are provided through contacts with business associates. Examples of business associates may include practice management software representatives, accountants, answering service personnel, etc. When these services are contracted, we may disclose your health information to our business associates so that they can perform the job we have asked them to do and bill you or your third- party payer for services rendered. All of our business associates are required to safeguard your information and to follow HIPAA Privacy Rules.
- **Research:** We may use or disclose medical information to researchers when an institution's review board or special privacy board has reviewed the proposed study and established protocols to ensure the privacy of the health information used in their research and determined that the researcher does not need to obtain your authorization prior to using your medical information for research purposes.
- **Public Health Activities:** Occasionally, we may disclose medical information for the public health activities. These activities include the following: to prevent or control disease, injury, or disability; to report reactions with medications or problems with products, to notify people of recalls of products that they may be using; to notify a person who may have been exposed to a disease or who may be at risk for contracting or spreading a disease of condition; to notify the proper government authority if we believe a patient has been the victim of abuse, neglect, or domestic violence (only when required by law).

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