

Notice of Privacy Practices

Clark Street Family Dental
16 Clarke Street, Lexington. MA 02421
Phone: (781) 861-0608

THIS NOTICE DESCRIBES HOW PROTECTED HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION.

PLEASE REVIEW THIS NOTICE CAREFULLY

Silva Andonyan, DMD and employees and associates of Clarke Street Family Dental (dental practice) follow the privacy practices described in this Notice. This notice is being given to you because federal law gives you the right to be told ahead of time about:

- How Clarke Street Family Dental will handle your health information
- Clarke Street Family Dental legal duties related to your health information
- Your rights with regard to your health information

A. HOW CLARKE STREET FAMILY DENTAL MAY USE AND DISCLOSE (SHARE) YOUR PROTECTED HEALTH INFORMATION

Clarke Street Family Dental is required to maintain the privacy of your health information. This includes health information about you that is collected during the course of treatment that may be kept in either paper or electronic form. Information such as your symptoms, diagnoses, treatment, prescriptions, imaging reports, care plan and demographic and payment information are examples of your health information that may be collected and stored in your health record. Information about care that you have received from other providers may also be included in your health record.

Clarke Street Family Dental uses your health information within its practice and shares your health information outside its practice. This Notice tells you how Clarke Street Family Dental uses and shares your health information for these and other purposes, and when the practice is required to get your specific permission to do so.

1. USES AND RELEASE OF YOUR HEALTH INFORMATION FOR TREATMENT, PAYMENT AND HEALTH CARE OPERATIONS

Except where prohibited by Massachusetts state laws or federal laws (see section 4), Clarke Street Family Dental may legally use and share your health information for treatment, payment and health care operations without prior authorization from you.

TREATMENT

Clarke Street Family Dental health care providers will use and share your health information to provide or manage your health care and any related services. This includes the coordination or management of your health care with a third party. For example, Clarke Street Family Dental may disclose your health information to a physician or other health care provider that may have or, maybe is required to provide treatment to you.

PAYMENT

Clarke Street Family Dental will use and share your health information as needed to bill and collect payment for the health care services it provides to you. For example, if you have health insurance, your health information may be shared with the insurance company or applicable government agency (eg: Medicare or Medicaid).

HEALTH CARE

Clarke Street Family Dental may use and share your health information for activities that are known as health care operations. Some information is shared with outside parties who perform health care operations or other services, on behalf of Clarke Street Family Dental (“business associates”). Business associates must also take steps to keep your health information private.

Examples of activities that make up health care operations may include:

- Monitoring the quality of care and making improvements as needed
- Reviewing medical records for completeness and accuracy
- Meeting standards set by regulating agency's
- Provider performance and training health care professionals
- Using outside business services; such as, labs, storage, auditing, and other consulting services
- Storing your health information on computers
- Destruction of paper and electronic documents as required by state and federal laws
- Managing and analyzing your health care information
- Contact information for appointment reminders, scheduled or cancelled appointments, insurance updates, billing or payment, lab services, patient care issues, treatment choices and follow up care instructions, other health related benefits and services that may be of interest to you at the address, telephone numbers, e-mail address or text you give to us (including leaving messages at the telephone numbers)
- Patients sign in sheet at the reception desk
- Use of your name in the reception area when your health care provider is ready to see you or has questions related to your health care

2. USES AND DISCLOSURES (SHARING) YOUR HEALTH INFORMATION FOR OTHER PURPOSES

Clarke Street Family Dental may legally use and/share your health information with others for the following purposes without your specific permission:

- As required by state and federal laws and regulations reporting reactions to medications or product problems, notification of recalls, infectious disease control
- For law enforcement purposes and public health activities under specific conditions such as reporting, including required reports, to the state public health, child, disabled persons, or elder abuse protection authorities, when someone is a victim of a crime, or suspected abuse, neglect or domestic violence
- To advert a serious health or safety threat to you or others
- For health oversight activities such as audits, inspections, investigations, and licensure
- For legal and administrative proceedings such as lawsuits and disputes, in response to a court or administrative order, subpoena, discovery request or other lawful request.
- Coroners or medical examiners
- For specialized government functions such as military command authorities if you are a member of the armed forces or a member of a foreign military authority
- National security, intelligence, counterintelligence and other national security authorized personnel to conduct special investigations
- Correctional institution or law enforcement official having lawful custody of protected health care information of inmate or patient under certain circumstances
- As authorized by and as necessary with workers compensation laws, your information regarding benefits for work related injuries and illnesses might be released as appropriate.

3. USES AND DISCLOSURES (SHARING) YOU MAY REQUEST BE LIMITED, OR THAT YOU MAY REQUEST NOT BE MADE

- Clarke Street Family Dental may share relevant health information about you with a family member or other person if they are involved in your care or payment for your care.
- Clarke Street Family Dental may use or share your health information to notify a family member, or other person responsible for you of your location or general medical condition.
- If you are in an emergency situation and not able to make your wishes known, Clarke Street Family Dental will use best judgment to decide whether to share your health information. If it is thought to be in your best interest, only relevant information will be shared with others.

4. USES OR DISCLOSURES (SHARING) OF HEALTH INFORMATION THAT REQUIRE YOUR WRITTEN PERMISSION (AUTHORIZATION)

Using and/or disclosing health information for most purposes other than treatment, payment, or health care operations, requires your specific authorization. Furthermore, certain information that may be contained in your health record is considered by state and federal law to be highly confidential and will not be shared without your written authorization. If you are asked to and give written permission for the use and/or disclosure of your health information, you may withdraw such consent at any time in writing or, in certain limited cases, orally, except to the extent that the providers have already acted upon your previously provided consent.

B. YOUR RIGHTS WITH RESPECT TO YOUR HEALTH INFORMATION AND HOW TO EXERCISE THEM

THE RIGHT TO REQUEST LIMITS ON THE USE AND SHARING OF YOUR HEALTH INFORMATION

You have the right to request restrictions on the use and sharing of your health information for treatment, payment, or health care operations. You can also request restrictions on using this information to notify you about appointments etc., Clarke Street Family Dental is not required to agree to your request with the following exception: If you pay for a health care product or service in full (out of pocket), you may request that Clarke Street Family Dental not share health information pertaining only to that product or service with your health plan for purposes of carrying out payment or health care operations (and is not for purposes of carrying out treatment). If Clarke Street Family Dental agrees to your request, the practice must put the restriction in writing and abide by it except if you need to be treated in an emergency. You may not ask Clarke Street Family Dental to restrict uses and sharing of information that the practice is legally required to make.

THE RIGHT TO REQUEST YOUR HEALTH INFORMATION BE COMMUNICATED TO YOU IN A CONFIDENTIAL MANNER

You have the right to request your health information be sent to you in different ways. For example, you may request Clarke Street Family Dental not contact you with appointment reminders by telephone, or only call at your work or cell telephone number rather than home. When Clarke Street Family Dental requests an address and telephone number(s) to contact you, it is your responsibility to provide the practice with a telephone number(s) and an address that will allow the practice to carry out needs to reach you and care for you. Clarke Street Family Dental may request that the method and location where you wish to be contacted be in writing and that you contact us with any changes to this information. Clarke Street Family Dental must agree to any reasonable request and cannot ask you to explain the reason for your request. Clarke Street Family Dental can require you to give information as to how a payment will be handled and what address a bill should be mailed to.

THE RIGHT TO VIEW AND RECEIVE A COPY OF YOUR HEALTH INFORMATION

You have the right to view and receive a paper or electronic copy of your health care information. You must request this in writing. The practice will respond within thirty (30) days from receipt of your request. If you request a copy of your records, you will be charged a fee. If your request is denied, the practice will explain the reasons in writing and tell you which rights you have, if any, to a review of the denial. The practice may offer to provide you with a summary or explanation of the information you requested as long as you agree in advance to this and to any fees that it may cost. If you ask for information that the practice does not have, but the practice knows the location of it, the practice must tell you where to direct your request. Certain information may be withheld from you in certain circumstances.

THE RIGHT TO CHANGE YOUR HEALTH INFORMATION

You have the right to ask the practice to change your health information related to your treatment and bills if you believe there has been a mistake or that information is missing.

- You are required to make your request in writing and give the reason for why you want the change.
- The practice has sixty (60) days to respond to your request. If the practice is not able to act on the request within sixty (60) days, the practice will notify you that Clarke Street Family Dental is extending the response by thirty (30) days.
- If the practice extends the response time, the practice will explain the delay to you in writing and give you a new date of when to expect a response.
- Clarke Street Family Dental may deny your request.
- If Clarke Street Family Dental denies your request, the practice must provide you with a written statement of the reasons for the denial, and what other steps are available to you.
- If Clarke Street Family Dental grants the request, the practice will ask you to provide information of the persons you want to receive the changes. You are required to agree to have the practice notify them along with any others who received the information before corrections were made, and who may have relied on the incorrect information to give you treatment.

THE RIGHT TO RECEIVE AN ACCOUNTING OF DISCLOSURE (RECORD OF WHEN YOUR HEALTH INFORMATION WAS SHARED WITHOUT YOUR PERMISSION/AUTHORIZATION)

You have the right to receive a record of the time that your health information has been shared. You are required to make the request in writing. You may request this as far back as six (6) years. The listing you receive will include the date, name, and address (if known) of the person or organization receiving your information. It will also include a brief description of the information given, and a brief statement of why the information was shared.

The following exceptions apply:

- This does not include sharing your medical information for the purpose of treatment, payment, or health care operations.
- It also does not include: Sharing your dental information if you gave permission in writing (signed an authorization form), sharing information with persons involved in your care. Using your information to communicate with you about your dental care. Sharing information for national security, intelligence, and counter intelligence purposes or to correctional institutions or law enforcement officials who have custody of you.
- Clarke Street Family Dental has sixty (60) days to respond to your request. If the practice has not been able to act on your request within the sixty (60) days, Clarke Street Family Dental will notify you that the practice is extending the response time by thirty (30) days.
- If Clarke Street Family Dental does extend the response time, the practice will explain the delay to you in writing and provide you with a new date of when to expect a response.
- Your first request for a record in any 12-month period is free.
- Clarke Street Family Dental reserves the right to charge a fee for any other requests in that period.
- Clarke Street Family Dental will notify you of the fee before the request is started.

THE RIGHT TO ASK FOR A PAPER COPY OF THIS NOTICE

You may ask for a paper copy of this notice. You can ask for a paper copy even if you agree to receive this notice by e-mail.

C. CLARKE STREET FAMILY DENTAL'S DUTIES WITH RESPECT TO YOUR HEALTH INFORMATION

Clarke Street Family Dental is required by law to keep your health information private. We are required to give people a notice of our legal duties and privacy practices with respect to your health information. The practice maintains your dental records for seven (7) years after you have left the practice; other records are maintained in accordance with state and federal regulations. Clarke Street Family Dental must abide by the terms of Notice currently in effect. Clarke Street Family Dental reserves the right to change its privacy practices and the terms of this Notice at anytime. Clarke Street Family Dental reserves the right to make the new Notice provisions effective for all protected health information that it maintains. If it does so, the updated Notice will be posted in the Clarke Street Family Dental reception area of the practice. You may request a copy of the current Notice at any time by contacting a representative at Clarke Street Family Dental at the contact information listed on the first page of this Notice.

D. HOW TO COMPLAIN IF YOU BELIEVE YOUR PRIVACY RIGHTS HAVE BEEN VIOLATED

If you think Clarke Street Family Dental may have violated your privacy rights or you disagree with any action the practice may have taken with regard to your health information, or you present a complaint, your care will not be affected in any way. It is the goal of Clarke Street Family Dental to give you the best care while respecting your privacy. You may file a complaint by contacting a representative at Clarke Street Family Dental at the contact information listed on the first page of this Notice.

You may also send a written complaint to the Susan Rhodes, Regional Manager, Office of Civil Rights, US Department of Health and Human Services, Government Center, J.F.K. Federal Building – Room 1875, Boston MA 02203, Voice phone (800) 368 1019, Fax (617) 565 3809, TDD (800) 537 7697

Clarke Street Family Dental will take no retaliatory action against you if you file a complaint about the practices.

E. PERSON TO CONTACT FOR INFORMATION OR WITH A COMPLAINT

If you have any questions about this Notice or any complaints, please contact a representative of Clarke Street Family Dental at the contact information listed on the first page of this Notice.

EFFECTIVE DATE OF THIS NOTICE MARCH 26TH 2013