FYI

NOTICE OF PRIVACY PRACTICES

THIS NOTICE DESCRIBES HOW INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE READ IT CAREFULLY.

As a patient of Dr Jeff Matilsky D.M.D., some of your health information is collected and maintained by the office. The office is required by law to maintain your privacy and the security of your health information and to provide you with this Notice of Privacy Practices. This Notice describes how your health information may be used and shared, and explains your privacy rights. The office is required to follow the terms of this Notice. We may, however, change our privacy practices and the terms of this Notice in the future, and those changes may effect all health information maintained by the office. If our privacy practices change, you will be provided the opportunity to receive an updated copy.

PERMITTED USES AND SHARING OF YOUR HEALTH INFORMATION:

Treatment: We will use and share your health information to ensure you are provided medical treatment and services. For example, the office may share your health information with a doctor or hospital that is giving you health care.

Payment: We will use and share your health information to receive payment for your dental treatment and services. For example, the office may send health information about you to your insurance when billing for your health care services.

Legal Requirements: We will share health information about you when required to do so by federal or state law.

To Avoid Harm: We may use or share your health information to prevent serious threat to your health and safety or the health and safety of others.

Lawsuits and Disputes: We may share your health information in response to a valid judicial or administrative order.

Coroners, Medical Examiners and Funeral Directors: Consistent with applicable law, we may share your health information to a coroner, medical examiner, or funeral director, so that they may carry out their duties. Your health information may also be shared to ensure organ and tissue donation.

Workers Compensation: We may share your health information with programs that give benefits for work-related injuries or illness.

National Security and Intelligence Activities: We may share your health information to authorized federal officials for activities related to national security and special investigations.

Other uses or sharing of your health information will be made only with your written authorization.

YOUR HEALTH INFORMATION RIGHTS:

Right to See and Get a Copy of Your Health Information: You may see and get a copy of your health information and billing records by making a written request to the office's Privacy Officer.

Right to a List of Disclosures Made of Your Health Information: You have the right to a list of those instances in which we have shared your health information, other than for treatment, payment, and health care operations, or when you specifically authorized the office to share your information. Your request must be in writing to the office's Privacy Officer. No disclosures made prior to April 14, 2003 will be provided.

Right to Request that Your Health Information be Communicated in a Confidential Manner: You may request, in writing to the office's Privacy Officer, that your health information be provided in a confidential manner, such as sending mail to an address other than your home. The office will honor reasonable requests.

Right to Request that We Not Use or Share Your Health Information: You have the right to request that we not use or share your health information for treatment, payment, or to persons involved in your care except when specifically authorized by you, when required by law, or in an emergency. Your request must be in writing to the office's Privacy Officer, and we will consider your request but we are not legally required to accept it.

Right to a Copy of the Notice: You may ask for a copy of this Notice anytime.