

NOTICE OF PRIVACY PRACTICES FOR PROTECTED HEALTH INFORMATION

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This notice describes how medical information about you or your child may be used and disclosed and how you may access this information. Please review it carefully!

The practice is permitted by federal privacy laws to make uses and disclosures of your health information for purposes of treatment, payment, and health care operations. Protected health information (PHI) is the information we create and obtain in providing our services to you (your child.) Such information may include documenting your symptoms and occlusion, examination and test results, diagnoses, treatment, and applying for future care or treatment. It also includes billing documents for those services.

Example of Use of Your PHI for Treatment Purposes

Our office obtains treatment information about you (your child) and records it in your chart. During the course of your treatment, Dr. Perret determines he will need to consult with your or your child's physician. Dr. Perret will share the information with the physician and obtain his/her input.

Example of Use of Your PHI for Appointment Confirmation

Our office routinely calls your home for appointment reminders. Using our best judgement, we may leave such information with a family member or other relative if you are not available.

Example of Use of Your PHI for Health Related Services

Our office recommends regular cleaning and check up appointments with your or your child's dentist. Our staff will contact his or her office and share information as necessary to arrange for said services and/or coordinate appointments.

Example of Use of Your PHI for Payment Purposes

Our office submits a request for payment to your health insurance company. The health insurance company (or other business associate helping us obtain payment) requests information from us regarding dental care given. We will provide information to them about you or your child and the care given.

Example of Use of Your PHI for Health Care Operations

Our office may obtain services from our insurers or other business associates such as quality assessment, quality improvement, outcome evaluation, protocol and clinical guideline development, training programs, credentialing, medical review, laboratory services, legal services, and insurance. We will share information about you or your child with such insurers or other business associates as necessary to obtain these services.

Your Health Information Rights

The health and billing records we maintain are the physical property of the practice. The information in it, however, belongs to you. You have a right to:

- Request a restriction on certain uses and disclosures of your or your child's PHI by delivering the request to our practice. We are not required to grant the request, but we will comply with any request that is granted.
- Obtain a paper copy of the current Notice of Privacy Practices for Protected Health Information (Notice) by making a request at our practice.
- Request that you be allowed to inspect and copy your or your child's health record and billing record by delivering the request to our office. Under certain circumstances, your request may be denied. If your request is denied, you will be informed of the reason for the denial and a copy of the record or a summary of treatment will be provided to a representative that you designate to receive this information. You may appeal a denial of access to your PHI, except in certain circumstances.

- Request an electronic copy of your or your child's dental record at the costs of labor incurred in producing an electronic copy.
 - Request that your or your child's dental care record be amended to correct incomplete or incorrect information by delivering a request to our practice. We may deny your request if you ask us to amend information that:
 - Was not created by us, unless the person or entity that created the information is no longer available to make the amendment
 - Is not part of your PHI kept by or for the practice
 - Is not part of the information that you would be permitted to inspect and copy
 - Is accurate and complete.
- If your request is denied, you will be informed of the reason for the denial and will have an opportunity to submit a statement of disagreement to be maintained with your records
- Request that communication of your or your child's PHI be made by alternative means or at an alternative location by delivering the request in writing to our practice.
 - Obtain an accounting of disclosures of your or your child's PHI as required to be maintained by law by delivering a request to our practice. An accounting will not include uses and disclosures of information for treatment, payment, or operations unless your records are maintained electronically. The accounting will also not include disclosures or uses made to you or made at your request; uses or disclosures made pursuant to an authorization signed by you; uses or disclosures made in a facility directory or to family members or friends relevant to that person's involvement in your or your child's care or in payment for such care; or, uses or disclosures to notify family or others responsible for your or your child's care of your or your child's location or condition.
 - Revoke authorizations that you made previously to use or disclose information by delivering a written revocation to our practice, except to the extent information or action has already been taken.
 - Request that information regarding a particular service not be disclosed to your health plan or insurance for a service that you have paid for out-of-pocket in full.

If you want to exercise any of the above rights, please contact Dr. Perret either in person during regular business hours at (813) 977-2828, or in writing at 15283 Amberly Drive, Tampa, FL 33647. He will inform you of the steps that need to be taken.

Our Responsibilities

The practice is required to:

- Maintain the privacy of your or your child's PHI as required by law
- Provide you with a notice as to our duties and privacy practices as to the information we collect and maintain about you or your child
- Abide by the terms of this Notice
- Notify you if we cannot accommodate a requested restriction or request
- Accommodate your reasonable requests regarding methods to communicate your or your child's PHI with you
- Notify you of a breach in your or your child's unsecured PHI

We reserve the right to amend, change, or eliminate provisions in our privacy practices and access practices and to enact new provisions regarding your or your child's PHI that we maintain. If our information practices change, we will amend our Notice. You are entitled to receive a revised copy of the Notice by calling and requesting a copy, or by visiting our office and picking up a copy.

To Request Information or File a Complaint

If you have questions, would like additional information, or want to report a problem regarding the handling of your or your child's information, you may contact Dr. Perret at (813) 977-2828.

Additionally, if you believe your or your child's privacy rights have been violated, you may file a written complaint at our office by delivering the written complaint to Dr. Perret. You may also file a complaint by mail, phone or via website to the Secretary of Health and Human Services (HHS) at the following address:

Office for Civil Rights
U.S. Department of Health and Human Services
200 Independence Avenue S.W. - Room 509F, HHH Building
Washington, D.C. 20201

877-696-6775
www.hhs.gov/ocr/hipaa

We cannot, and will not, require you to waive the right to file a complaint with HHS as a condition of receiving treatment from the practice. We cannot, and will not, retaliate against you for filing a complaint with HHS.

Other Disclosures and Uses

Communication with Family

Using our best judgment, we may disclose your or your child's PHI to a family member, other relative, close personal friend, or any other person you identify relevant to that person's involvement in your or your child's care or in payment for such care if you do not object or in an emergency.

Notification

Unless you object, we may use or disclose your or your child's PHI to notify, or assist in notifying, a family member, personal representative, or other person responsible for your or your child's care, about your or your child's location, general condition, or death.

Research

We may disclose information to researchers when their research has been approved by an institutional review board that has reviewed the research proposal and established protocols to ensure the privacy of your or your child's PHI.

Disaster Relief

We may use and disclose your PHI to assist in disaster relief efforts.

Food and Drug Administration

We may disclose to the FDA your PHI relating to adverse events with respect to food, supplements, products and product defects, or post-marketing surveillance information to enable product recalls, repairs, or replacements.

Workers Compensation

If you are seeking compensation through Workers Compensation, we may disclose your PHI to the extent necessary to comply with laws relating to Workers Compensation.

Public Health

As authorized by law, we may disclose your or your child's PHI to public health or legal authorities charged with preventing or controlling disease, injury, or disability; to report reactions to medications or problems with products; to notify people of recalls; to notify a person who may have been exposed to a disease or who is at risk for contracting or spreading a disease or condition.

Abuse & Neglect

We may disclose your or your child's PHI to public authorities as allowed by law to report abuse or neglect.

Employers

We may release your PHI to your employer if we provide health care services to you at the request of your employer, and the health care services are provided either to conduct an evaluation relating to medical surveillance of the workplace or to evaluate whether you have a work-related illness or injury. In such circumstances, we will give you written notice of such release of information to your employer. Any other disclosures to your employer will be made only if you execute a specific authorization for the release of that information to your employer.

Correctional Institutions

If you are an inmate of a correctional institution, we may disclose to the institution or its agents the PHI necessary for your health and the health and safety of other individuals.

Law Enforcement

We may disclose your or your child's PHI for law enforcement purposes as required by law, such as when required by a court order, or in cases involving felony prosecution, or to the extent an individual is in the custody of law enforcement.

Health Oversight

Federal law allows us to release your or your child's PHI to appropriate health oversight agencies or for health oversight activities.

Judicial/administrative Proceedings

We may disclose your or your child's PHI in the course of any judicial or administrative proceeding as allowed or required by law, with your authorization, or as directed by a proper court order.

Serious Threat

To avert a serious threat to health or safety, we may disclose your or your child's PHI consistent with applicable law to prevent or lessen a serious, imminent threat to the health or safety of a person or the public.

For Specialized Governmental Functions

We may disclose your or your child's PHI for specialized government functions as authorized by law such as to Armed Forces personnel, for national security purposes, or to public assistance program personnel.

Coroners, Medical Examiners, and Funeral Directors

We may release your or your child's PHI to a coroner or medical examiner. This may be necessary, for example, to identify a deceased person or determine the cause of death. We may also release health information about patients to funeral directors as necessary for them to carry out their duties.

Other Uses

Other uses and disclosures, besides those identified in this Notice, will be made only as required by law or with your written authorization and you may revoke the authorization as previously provided in this Notice under "Your Health Information Rights."

Website

This Notice is posted on our website at http://smileneWTampa.com/contact_us.html