

HEALTH INFORMATION PRIVACY POLICIES & PROCEDURES

If the **Business Associate** does not promptly and effectively cure the breach or violation, we will terminate our contract with the **Business Associate**, or if contract termination is not feasible, report the **Business Associate's** breach or violation to the U.S. Department of Health and Human Services (HHS).

9. Notice of Privacy Practices

Our dental office will maintain a **Notice of Privacy Practices** as required by the Privacy Rules.

- a) **Our Notice** — Our dental office will use and disclose PHI only in conformance with the contents of our **Notice of Privacy Practices**. We will promptly revise a **Notice of Privacy Practices** whenever there is a material change to our uses or disclosures of PHI to our legal duties, to the patients' rights, or to other privacy practices that render the statements in that Notice no longer accurate.

Form 1, Notice of Privacy Practices, found in this Privacy Kit, contains the terms that federal law requires.

- b) **Distribution of Our Notice** — Our dental office will provide our **Notice of Privacy Practices** to any person who requests it, and to each patient no later than the date of our first service delivery after April 14, 2003.

Our dental office will have our **Notice of Privacy Practices** available for patients to take with them. We will also post our **Notice of Privacy Practices** in a clear and prominent location where it is reasonable to expect patients seeking service from us will be able to read the Notice.

- c) **Acknowledgement of Notice** — Our dental office will make a good faith effort to obtain from the patient a written Acknowledgement of receipt of our **Notice of Privacy Practices**.

Our dental office shall use Form 2, **Acknowledgement of Receipt of Notice of Privacy Practices**, found in this Privacy Kit, to obtain the Acknowledgement. If we cannot obtain written Acknowledgement from the patient, we will use the form to document our attempt and the reason why written Acknowledgement was not signed by the patient.

10. Patients' Rights

Our dental office will honor the rights of patients regarding their PHI.

- a) **Access** — With rare exceptions, our dental office must permit patients to request access to the PHI we or our **Business Associates** hold.

No PHI will be withheld from a patient seeking access unless we confirm that the information may be withheld according to the Privacy Rules. We may offer to provide a summary of the information in the chart. The patient must agree in advance to receive a summary and to any fee we will charge for providing the summary. Our dental office will contact our **Business Associates** to retrieve any PHI they have on the patient.