



The Little Smile Loft
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STATEMENT OF PRIVACY PRACTICES (HIPAA COMPLIANCE)

The Little Smile Loft is dedicated to protect the privacy rights of our patients and the confidential information entrusted to us. The commitment of each employee to ensure that your health information is never compromised is a principle concept of our practice. We may, from time to time, amend our privacy policies and practices but will always inform you of any changes that might affect your rights.

PROTECTING YOU AND YOUR CHILD'S PERSONAL HEALTHCARE INFORMATION

We use and disclose the information we collect from you only as allowed by the Healthcare Insurance Portability and Accountability Act and the state of Washington. This includes issues relating to your child's treatment, payment, and our dental care operations. Your child's personal health information will never be otherwise given to anyone – even other family members – without your consent. You, of course, may give written authorization for The Little Smile Loft to disclose your child's information to anyone you choose, for any purpose.

Our office and electronic systems are secure from unauthorized access and our employees are trained to make certain that the confidentiality of your child's records is always protected. Our privacy policy and practices apply to all former, current, and future patients, so you can be confident that your child's protected health information will never be improperly disclosed or released.

COLLECTING PROTECTED HEALTH INFORMATION

We will only request personal information needed to provide our standard of quality dental care, implement payment activities, conduct normal dental practice operations, and comply with the law. This may include you or your child's name, address, telephone number(s), social security number, employment data, medical history, health records, etc. While most of the information will be collected from you, we may obtain information from third parties if it is deemed necessary. Regardless of the source, you and your child's personal information will always be protected to the full extent of the law.

DISCLOSURE OF YOUR PROTECTED HEALTH INFORMATION

As stated above, we may disclose information as required by law. We are obligated to provide information to law enforcement and government officials under certain circumstances. We will not use you or your child's information for marketing purposes without your written consent. We may use and/or disclose your child's health information to communicate reminders about your child's appointments including voicemail messages, answering machines, electronic mail, and postcards.

PATIENTS RIGHTS

You have a right to request copies of your child's healthcare information; to request copies in a variety of formats; and to request a list of instances in which we, or our business associates, have disclosed you or your child's protected information for uses other than stated above. All such requests must be in writing. We may charge you for your copies in an amount allowed by law. If you believe your rights have been violated, we urge you to notify us immediately. You can also notify the U.S. Department of Health and Human Services.

We thank you for being a part of The Little Smile Loft. Please let us know if you have any questions concerning your privacy rights and the protection of your personal health information.