



TELLURIDE CENTER FOR DENTISTRY

Telluride Center for Dentistry Privacy Policy

(Notice of Privacy Practices)

This notice describes how your medical and dental information may be used and disclosed and how you can access this information. Please review it carefully.

Our Commitment to Your Privacy

Our dental office is committed to protecting the privacy of your personal health information (PHI). We create a record of the care and services you receive at our office. This record is necessary to provide you with quality care and to comply with legal requirements.

We are required by law to:

- Maintain the privacy of your health information
- Provide you with this notice of our legal duties and privacy practices
- Follow the terms of the notice currently in effect

How We May Use and Disclose Your Health Information

We may use and disclose your health information for the following purposes:

Treatment

We may use your health information to provide, coordinate, or manage your dental care and related services.

Example: A dentist may share information with a specialist regarding your treatment.

Payment

We may use your information to bill and receive payment for the dental services you receive.

Example: Sending claims to your dental insurance company.

Healthcare Operations

We may use your information for office operations such as:

- Quality assessment
- Staff training
- Licensing and accreditation
- Appointment reminders
- Business management activities

Appointment Reminders

We may contact you to remind you of upcoming appointments by phone, text, email, or mail.

Treatment Alternatives and Health Information

We may contact you with information about treatment options or other health-related benefits and services that may interest you.

Individuals Involved in Your Care

Unless you object, we may share relevant health information with family members or others involved in your care or payment for your care.

As Required by Law

We will disclose health information when required by federal, state, or local law.

Public Health and Safety

We may disclose your information for public health activities, such as:

- Preventing disease
- Reporting abuse or neglect
- Responding to health oversight agencies

Your Rights Regarding Your Health Information

You have the right to:

Request Restrictions

You may request limits on how your information is used or disclosed. We are not required to agree to all requests but will consider them.

Request Confidential Communication

You may request that we contact you in a specific way (for example, only by phone or mail).

Inspect and Copy Your Records

You have the right to review and obtain copies of your dental and billing records.

Request Corrections

If you believe information in your records is incorrect or incomplete, you may request an amendment.

Request an Accounting of Disclosures

You may request a list of certain disclosures we have made of your health information.

Receive a Copy of This Notice

You may request a paper copy of this notice at any time.

Changes to This Privacy Policy

We reserve the right to change this privacy policy at any time. Any updated policy will apply to all health information we maintain. A current copy will be available in our office and upon request.

Questions or Complaints

If you believe your privacy rights have been violated, you may file a complaint with our office or with the **U.S. Department of Health and Human Services**. You will not be penalized for filing a complaint.