# **Notice of Privacy Practices**

This notice describes how health information about you may be used and disclosed and how you can get access to this information. Please review this carefully. Your health information is important to us.

If you have any questions about this notice, please contact
T.L.C. Dental Group
40986 California Oaks Road, Murrieta, CA 92562 -- (951) 304-3044

#### **OUR LEGAL DUTY**

Federal and state law requires us to maintain the privacy of your health information. That law also requires us to give you this notice about privacy practices, our legal duties and your rights concerning your health information. We must follow the privacy practices we describe in this notice while it is in effect. This notice took effect April 14, 2003 and will remain in effect until we replace it. We reserve the right to change our privacy practices and the terms of this notice at any time, provided such applicable law permits the changes. We reserve the right to make the changes in our privacy practices and the new terms of our notice effective for all health information that we maintain, including health information we created or received before we made the changes. Before we make a significant change in our privacy practices, we will change this notice and make the new notice available upon request. You may request a copy of our notice at any time. For more information about our privacy practices, or for additional copies of this notice, please contact us using the information listed on this form.

#### **USES AND DISCLOSURES OF HEALTH INFORMATION**

We use and disclose health information about you for treatment, payment and health care operations. For example:

#### **Treatment**

We may use your health information for treatment or disclose it to a dentist, physician or other health care provider providing treatment to you.

#### **Payment**

We may use and disclose your information to obtain payment for services we provide to you. We may also disclose your health information to another health care provider or entity that is subject to the federal privacy rules for its payment activities.

## **Healthcare Operations**

We may use and disclose your health information for our health care operations. Health care operations include quality assessment and improvement activities, reviewing the competence or qualifications of health care professionals, evaluating practitioner and provider performance, conducting training programs, accreditation, certification licensing or credentialing activities. We may disclose your health information to another health care provider or organization that is subject to the federal privacy rules and that has a relationship with you to support some of their health care operations. We may disclose your information to help these organizations conduct quality assessment and improvement activities, review the competence or qualifications of health care professionals, or detect or prevent health care fraud and abuse.

# **To Your Family and Friends**

We may disclose your health information to a family member, friend or other person to the extent necessary to help with your health care. Before we disclose your health information to these people, we will provide you with an opportunity to object to our use of disclosure. If you are not present, or in the event of your incapacity or in an emergency, we will disclose your medical information based on our professional judgment of whether the disclosure would be in your best interest. We may use our professional judgment and our experience with standard practices to make reasonable inferences of your best interest in allowing a person to pick up filled prescriptions, medical supplies, x-rays, or other similar forms of health information. We may use disclosed information about you to notify or assist in notifying a person involved in your care, or your location and general condition.

### **Appointment Reminders**

We may use or disclose your health information to provide you with appointment reminders (such as voicemail messages, postcards, or letters).

#### **Disaster Relief**

We may use or disclose your health information to a public or private entity authorized by law or by its charter to assist in disaster relief efforts.

IF YOU HAVE QUESTIONS, PLEASE ASK.