

Notice of Privacy Practices, John P. Poirier, DMD, PA

This notice describes how your information can be used or disclosed and how you can access the information. Please review it carefully.

We are required by law to maintain the privacy of Protected Health Information (“PHI”), to provide individuals with notice of our legal duties and privacy practices with respect PHI, and to notify individuals following a breach of unsecured PHI. We must follow the privacy practices that are described in this Notice while it is in effect. This Notice takes effect **Monday, March 14, 2016** and will remain in effect until we replace it.

We reserve the right to change our privacy policy and the terms of this Notice at any time, provided such changes are permitted by applicable law, and to make new Notice provisions effective for all the PHI that we maintain. When we make a significant change in our privacy practices, we will change this Notice and post the new Notice clearly and prominently at our practice location, and we will provide copies of the new notice 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 at the end of this Notice.

We will never use your PHI for marketing reasons and we will never sell your PHI to anyone.

How we may use and disclose your PHI.

Treatment. We may use and disclose your PHI for your treatment. For example, we may disclose your health information to a specialist providing treatment to you.

Payment. We may use and disclose your PHI to obtain reimbursement for the treatment and services you receive from us or another entity involved in your care. Payment activities include billing, collections, claims management, and determinations of eligibility and coverage to obtain payment from you, an insurance company, or another third party. For example, we may send claims to your dental health plan containing certain PHI.

Appointment reminders. We may use or disclose your PHI to provide you with appointment reminders (such as voicemails, emails and letters).

Healthcare operations. We may use and disclose your PHI in connection with our healthcare operations. For example, healthcare operations include quality assessment and improvement activities, conducting training programs, and licensing activities.

Individuals involved in your care or payment for your care. We may disclose your PHI to your family or friends or any other individual identified by you when they are involved in your care or payment for your care. Additionally, we may disclose PHI about you to a patient representative. If a person has the authority by law to make healthcare decisions for you, we will treat that patient representative as we would you with respect to your PHI.

Disaster relief. We may use or disclose your PHI to assist in disaster relief.

Required by law. We may use or disclose your PHI when we are required by law to do so, this may include response to a subpoena, warrant, discovery request or court order relating to criminal, civil, or administrative proceedings. When legally permitted to do so, we will attempt to make efforts to notify you of the proceeding and the request.

Public health activities. We may disclose your PHI for public health information for public health activities, including disclosures to: (1) prevent or control disease, injury or disability; (2) report child abuse or neglect; (3) report reactions to medications or problems with products or devices; (4) notify a person of a recall, repair, or replacement products or devices; (5) notify a person who may have been exposed to a disease or condition; or, (6) notify the appropriate government authority if we believe a patient has been the victim of abuse, neglect, or domestic violence.

National security. We may disclose to military authorities the PHI of armed forces personnel under certain circumstances. We may disclose to authorized federal officials PHI required for lawful intelligence, counterintelligence, and other national security activities. We may disclose to correctional institution or law enforcement official having lawful custody the PHI of an inmate or patient.

Secretary of HHS. We will disclose your PHI to the Secretary of the U.S. Department of Health and Human Services when required to investigate or determine compliance with HIPAA.

Worker's Compensation. We may disclose your PHI to the extent authorized by and the extent necessary to comply with laws relating to worker's compensation or other similar programs established by law.

Health oversight activities. We may disclose your PHI to an oversight agency for activities authorized by law. These oversight activities include audits, investigations, inspections, and credentialing, as necessary for licensure and for the government to monitor the health care system, government programs, and compliance with civil rights laws.

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

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Coroners, medical examiners, and funeral directors. We may release your PHI to a coroner or medical examiner. This may be necessary, e.g. to identify a deceased person or determine the cause of death. We may also disclose PHI to funeral directors consistent with applicable law to enable them to carry out their duties.

Other uses and disclosures. Your authorization is required, with a few exceptions, for disclosure of psychotherapy notes, use or

disclosure of PHI for marketing, and the sale of PHI. We will obtain your written authorization before disclosing your PHI for purposes other than those in this notice (or as otherwise permitted or required by law). You may revoke an authorization in writing at any time. Upon receipt of the written revocation, we will stop using or disclosing your PHI, except to the extent that we have already taken action in reliance on the authorization.

Your health information rights.

Access. You have the right to look at or get copies of your PHI, with limited exceptions. You must make the request in writing. You may obtain a form to request access by using the contact information located at the end of this notice. You may also request access by sending us a letter to the address at the end of this notice. If you request information that we maintain electronically, you have the right to an electronic copy. We will charge you a reasonable cost-based fee for the cost of supplies and labor of copying, and for postage if you want copies mailed to you (\$1/page for copies and \$20/hour for labor).

If you are denied a request for access, you have the right to have the denial reviewed in accordance with the requirements of applicable law.

Disclosure accounting. With the exception of certain disclosures, you have the right to receive an accounting of disclosures of your PHI in accordance with applicable laws and regulations. To request an accounting of disclosures of your PHI, you must submit your request in writing to the Privacy Officer. If you request this accounting more than once within a 12-month period, we may charge you a reasonable cost based fee for responding to additional requests (\$1/page for copies and \$20/hour for labor).

Right to request a Restriction. You have the right to request additional restrictions on our use or disclosure of your PHI by submitting a written request to the Privacy Officer. Your written request must include, (1) what PHI you want to limit, (2) whether you want to limit use, disclosure, or both, and (3) to whom you want the limits to apply.

Questions or complaints. If you want more information about our privacy practices or have questions or concerns, please contact us.

If you are concerned that we may have violated your privacy rights, or if you disagree with a decision we made about access to your PHI or in a response to a request you made to amend or restrict the use or disclosure of your PHI or to have us communicate with you by alternative means or at alternative locations, you may complain to us using the contact information listed at the end of this Notice. You also may submit a written complaint to the U.S. Department of Health and Human Services. We will provide you with the address to file your complaint with the U.S. Department of Health and Human Services upon request. We support your right to privacy of your protected health information. We will not retaliate in any way if you choose to file a complaint with us or with the U.S. Department of Health and Human Services.

Privacy Officer and Security Officer:

Brendan O'Keefe, Office Manager, Office of John P. Poirier DMD, PA
325-D Kennedy Memorial Drive, Waterville, Maine 04901
Tele: 207-872-8911; Fax 207-872-6967; office@johnpoirierdmd.com

We are not required to agree with your request except in the case where the disclosure is to a health plan for purposes of carrying out payment or health care operations, and the PHI pertains solely to a health care item or service for which you, or a person on your behalf (other than the health plan), has paid our practice in full.

Alternative communication. You have the right to request that we communicate with you about your PHI by alternative means or at alternative locations. You must make your request in writing. Your request must specify the alternative means or location, and provide satisfactory explanation of how payments will be handled under the alternative means or location you request. We will accommodate all reasonable requests. However, if we are unable to contact you using the ways or locations you have requested we may contact you using the information we have.

Amendment. You have the right to request that we amend your PHI. Your request must be in writing, and it must explain why the PHI should be amended. We may deny your request under certain circumstances. If we agree to your request, we will amend your record(s) and notify you of such. If we deny your request for an amendment, we will provide you with a written explanation of why we denied it and explain your rights.

Right to Notification of Breach. You will receive notification of breaches of your unsecured PHI as required by law.

Electronic Notice. You may receive a paper copy of this notice upon request, even if you have agreed to receive this notice electronically on our website or by email.