

KEVIN FINNERTY, D.D.S. , PC

NOTICE OF PRIVACY PRACTICES

This notice describes how health information about you may be used and disclosed in our practice as established by The Department of Health and Human Services. We are required to implement this notice to all our patients.

We reserve the right to change our privacy practices permitted by law at any time. You may request a copy of this notice at any time. For further information about our privacy practices, or additional copies, please contact our HIPAA Compliance Officer listed at the end of this notice.

Our practice uses and discloses health information pertaining to your treatment, payment and healthcare. The following are areas of healthcare operations:

***TREATMENT:** For the use and disclose of personal health information to a physician or other healthcare provider. To notify a family member or person responsible for your care, only if you agree that we may do so. You may give us written authorization to use or disclose your health information to anyone for any purpose. We will only disclose your health information to authorities if we believe that you are a victim of abuse, neglect or other violence.

***MARKETING PURPOSES:** We will not use your health information for marketing communications without prior written consent.

***PAYMENT:** We may use or disclose your personal health information to obtain payment for services rendered to you by purposes of collection.

Patients have the right to review or receive copies of their personal health information. You may request in writing to obtain access to your information to our HIPAA Compliance Officer. For this request we will charge \$5.00 for each page copied, and \$20.00 per hour for staff time to locate and copy your health information, as well as the cost of postage if you want the copies mailed to you.

FOR QUESTIONS AND COMPLAINTS

If you want more information concerning our privacy practices of your rights, please contact the following:

Compliance Officer: Kevin P. Finnerty, D.D.S.

Address: 1450 Kempsville Road--Virginia Beach, Va 23464

Phone: 757-424-6644/757-424-2822 (fax)

Patients signature _____ **Date:** _____

Witness: _____ **Date:** _____