

Dental Wellness Center of Maryville
Notice of Privacy Practices- Effective Date: February 16, 2026

Our Commitment to Your Privacy-Dental Wellness Center of Maryville is required by law to:

- Maintain the privacy and security of your protected health information (PHI)
 - Provide you with this Notice explaining our legal duties and privacy practices
 - Follow the terms of the Notice currently in effect
 - Notify you in the event of a breach of your unsecured PHI
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How We May Use and Disclose Your Health Information-We may use and disclose your health information for the following purposes:

1. Treatment

To provide, coordinate, or manage your dental care.

Example: Sharing information with specialists, labs, pharmacies, or referring providers.

2. Payment

To obtain payment for services provided.

Example: Submitting claims to your dental or medical insurance.

3. Healthcare Operations

For practice operations such as quality improvement, staff training, auditing, and licensing.

4. Appointment Reminders & Communication

We may contact you via phone, voicemail, text message, or email for:

- Appointment reminders
- Treatment follow-up
- Billing matters

You may request alternative communication methods at any time.

Uses and Disclosures That Require Your Authorization-We will obtain your written authorization for:

- Marketing communications not related to your care
- Sale of your PHI
- Most uses or disclosures of psychotherapy notes (if applicable)
- Any use or disclosure not otherwise described in this Notice

You may revoke authorization at any time in writing.

Substance Use Disorder (SUD) Records – 42 CFR Part 2-Certain records related to substance use disorder diagnosis, treatment, or referral may be protected under federal law (42 CFR Part 2).

Where applicable:

- Such records may not be used or disclosed without your written consent, except as permitted by law.
- You have the right to request a single consent for treatment, payment, and healthcare operations related to Part 2 records.
- We are prohibited from using or disclosing Part 2 records in civil, criminal, administrative, or legislative proceedings against you without specific court authorization.
- We are required to provide notice of breach of unsecured Part 2 records consistent with HIPAA breach notification rules.

If your care involves Part 2 protected information, additional consent language may apply.

Special Situations-We may disclose your PHI when required by law, including:

- Public health reporting
 - Health oversight activities
 - Workers' compensation
 - Judicial or administrative proceedings
 - Law enforcement purposes
 - To avert a serious threat to health or safety
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Your Rights Regarding Your Health Information-You have the right to:

1. Access

Request inspection or copies of your health records (electronic or paper).

2. Amendment

Request corrections to your records if you believe they are incorrect or incomplete.

3. Accounting of Disclosures

Request a list of certain disclosures made outside treatment, payment, and operations.

4. Restriction Requests

Request restrictions on certain uses or disclosures.

We are required to agree to a restriction request if:

- The disclosure is to a health plan
- It relates to a service paid in full out-of-pocket
- The disclosure is not otherwise required by law

5. Confidential Communications

Request that we contact you in a specific way (e.g., only at work, no voicemail).

6. Breach Notification- Receive written notification if your unsecured PHI has been breached.

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Complaints

If you believe your privacy rights have been violated, you may file a complaint with:

Privacy Officer

Dental Wellness Center of Maryville
2933 Maryville Rd. Maryville IL 62062

Phone: 618-288-1923

Email: office2933@dentalwellnessmaryville.com

You may also file a complaint with:

U.S. Department of Health and Human Services
Office for Civil Rights

www.hhs.gov/ocr/privacy/hipaa/complaints/

You will not be retaliated against for filing a complaint.