

UPDATED NOTICE OF PRIVACY PRACTICES

NOTICE OF PRIVACY PRACTICES

THIS NOTICE DESCRIBES HOW MEDICAL AND DENTAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

The privacy of your health information is important to us.

OUR LEGAL DUTY

We are required by federal and applicable state law to maintain the privacy of your protected health information (“PHI”) and to provide you with this Notice of our legal duties and privacy practices.

We must follow the privacy practices described in this Notice while it is in effect. This Notice applies to all records created or received by our practice.

Effective Date: February 16, 2026

This Notice will remain in effect until it is replaced.

We reserve the right to change our privacy practices and this Notice at any time, as permitted by law. Any changes will apply to all PHI we maintain. A revised Notice will be made available upon request and posted in our office and on our website, if applicable.

USES AND DISCLOSURES OF HEALTH INFORMATION

Treatment

We may use or disclose your health information to dentists, physicians, hygienists, specialists, or other healthcare providers involved in your care.

Payment

We may use or disclose your health information to obtain payment for services, including billing insurance companies, benefit plans, or other third parties.

Healthcare Operations

We may use or disclose your health information for practice operations such as quality improvement, training, licensing, credentialing, audits, and business administration.

SPECIAL PROTECTIONS FOR CERTAIN HEALTH INFORMATION (NEW UPDATE)

Reproductive Health Information

We will not use or disclose reproductive health information for purposes of investigating or imposing liability related to lawful reproductive healthcare. This includes, but is not limited to:

- Contraception
 - Pregnancy-related care
 - Referrals or counseling related to reproductive health

We will only disclose this information when permitted by law and never for law enforcement or investigative purposes related to lawful care.

Substance Use Disorder (SUD) Information

Health information related to substance use disorder treatment receives additional federal protection under 42 CFR Part 2.

- We will not disclose SUD-related information without your specific written authorization, except as permitted or required by law.
- Your authorization may be revoked in writing at any time.

OTHER PERMITTED USES AND DISCLOSURES

With Your Authorization

You may give us written authorization to use or disclose your health information for purposes not otherwise permitted. You may revoke your authorization in writing at any time.

Family and Friends

With your permission, we may disclose relevant health information to a family member, friend, or other person involved in your care or payment for your care.

Emergencies

In emergency situations or if you are incapacitated, we may disclose information based on professional judgment if it is in your best interest.

Appointment Reminders & Communication

We may contact you via phone, voicemail, text, email, or mail to remind you of appointments, provide treatment information, or discuss billing matters.

Required by Law

We may disclose health information when required to do so by federal or state law. Public

Health & Safety

We may disclose health information to appropriate authorities if we believe it is necessary to prevent a serious threat to your health or safety or the safety of others.

PATIENT RIGHTS

You have the right to:

- Access your health records
- Request amendments to your records
- Receive an accounting of disclosures
- Request restrictions on certain uses or disclosures
- Request confidential communication
- Receive a paper copy of this Notice, even if you receive it electronically
- File a complaint without retaliation

Requests must be submitted in writing. Reasonable, cost-based fees may apply for copies.

QUESTIONS OR COMPLAINTS

If you have questions about this Notice or believe your privacy rights have been violated, please contact: The Grapevine Dentist, 1600 W. Northwest Hwy, Suite 200, Grapevine, TX 76051, (phone) 817-251-4888, (email) info@thegrapevinedentist.com

You may also file a complaint with the U.S. Department of Health and Human Services. We will not retaliate against you for filing a complaint.

ACKNOWLEDGMENT

You may be asked to sign an acknowledgment that you received this Notice.