# STATEMENT OF PRIVACY PRACTICES

Our office is dedicated in protecting the privacy of our patients and the confidential information entrusted to us. The commitment of each employee to ensure that your health information is never compromised is a principal concept of our practice, and will always inform you of any amendments to our policy practices that may affect your rights.

### PROTECTING YOUR HEALTHCARE INFORMATION

We use and disclose the information we collect from you only as allowed by the Health Insurance Portability and Accountability Act and the state of Washington. This includes issues relating to your treatment, payments, and our health care operations. Your health information will never be given to anyone-even family members- without your consent. You may request that your information is given to whomever you wish by providing us permission in writing.

#### **COLLECTING PROTECTED HEALTH INFORMATION**

We will only request personal information needed that enables us to provide our standard of quality healthcare, implement payment activities, conduct health practice operations, and comply with the law. This may include your name, address, telephone number(s), Social Security number, employment data, medical history, health records, ect. We may obtain information from third parties when deemed necessary. However regardless of the source, your personal information will always be protected to the full extent of the law.

## **DISCLOSURE OF YOUR PROTECTED HEALTH INFORMATION**

In certain circumstances we are obligated to provide information to law enforcement and government authorities. We will never use your information for purposes of marketing without your consent. We may use and/or disclose your health information to communicate reminders about your appointments including voicemail messages, answering machines, and postcards.

#### **YOUR RIGHTS AS OUR PATIENT**

You have the right to request copies of your healthcare information; to request a list of instances in which we have disclosed your information as stated above. All such requests must be in writing. We reserve the right to charge for copies that are requested in any other format than paper as allowed by law. If you believe your rights have been violated, please notify us immediately. You may also notify the U.S. Department of Health and Human Services.

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