

Island View Dental

Notice of Privacy Practices

Effective Date: 1/1/2026

Purpose of This Notice

This Notice of Privacy Practices describes how medical and dental information may be used and disclosed, and how patients can access this information. Island View Dental is committed to protecting the privacy of personal health information (PHI) in compliance with the Health Insurance Portability and Accountability Act (HIPAA).

Our Legal Duty

Island View Dental is required by law to:

- Maintain the privacy of PHI.
- Provide this notice describing legal duties and privacy practices.
- Notify patients if a breach of unsecured PHI occurs.
- Follow the terms of this notice currently in effect.

How We May Use and Disclose Health Information

1. For Treatment

PHI may be used or disclosed to provide, coordinate, or manage dental care and related services. This includes sharing information with other healthcare providers involved in treatment.

2. For Payment

PHI may be used or disclosed to obtain payment for services, such as submitting claims to insurance companies or verifying coverage.

3. For Healthcare Operations

PHI may be used or disclosed for practice operations, including quality assessment, staff training, accreditation, and business management.

4. Appointment Reminders and Treatment Alternatives

PHI may be used to contact patients with appointment reminders or information about treatment options and services.

5. Individuals Involved in Care or Payment

With patient permission, PHI may be shared with family members or others involved in care or payment.

6. As Required by Law

PHI may be disclosed when required by federal, state, or local law.

7. Public Health and Safety

PHI may be disclosed for public health activities, such as preventing disease, reporting abuse, or

responding to health oversight agencies.

8. Law Enforcement and Legal Proceedings

PHI may be disclosed in response to a court order, subpoena, or other lawful process.

9. Research

PHI may be used or disclosed for research purposes when approved by an institutional review board or with patient authorization.

10. Workers' Compensation

PHI may be disclosed as authorized to comply with workers' compensation laws.

Other Uses and Disclosures

Uses and disclosures not described in this notice will be made only with written authorization. Authorization may be revoked in writing at any time, except to the extent that action has already been taken.

Patient Rights

1. Right to Access

Patients have the right to inspect and obtain a copy of their PHI, with limited exceptions. Requests must be made in writing.

2. Right to Amend

Patients may request an amendment to their PHI if they believe it is incorrect or incomplete. Requests must be in writing and include a reason for the amendment.

3. Right to an Accounting of Disclosures

Patients may request a list of certain disclosures of their PHI made by Island View Dental.

4. Right to Request Restrictions

Patients may request restrictions on how PHI is used or disclosed for treatment, payment, or operations. Island View Dental is not required to agree to all requests but will comply when legally obligated.

5. Right to Request Confidential Communications

Patients may request that communications be sent by alternative means or to an alternative location.

6. Right to a Paper Copy of This Notice

Patients may request a paper copy of this notice at any time, even if they have agreed to receive it electronically.

Changes to This Notice

Island View Dental reserves the right to change this notice and make the revised notice effective for all PHI maintained. The current notice will be posted in the office and available upon request.

Complaints

Concerns or complaints about privacy practices may be submitted to:

Complaints may also be filed with the U.S. Department of Health and Human Services, Office for Civil Rights. No retaliation will occur for filing a complaint.

Contact Information

For questions about this notice or privacy practices, contact:

Privacy Officer

Island View Dental
Heidi Johnson DDS

425-918-5812

Acknowledgment of Receipt:

Patients will be asked to sign an acknowledgment that they have received this Notice of Privacy Practices.