

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

Our duties to you

- We're required by law to keep your protected health information (your dental and health records, x-rays, and billing and insurance information) private and secure.
- We'll tell you promptly if a breach happens that may have compromised the privacy or security of your information.
- We must follow the practices described in this notice and give you a copy of it.
- We won't use or share your information in ways not described here unless you give us permission in writing. You can change your mind at any time by telling us in writing.

How we use and share your information

We can use and share your information for the following purposes without your written permission.

- **Treatment.** To provide and coordinate your care. For example, we use your x-rays and chart to plan a crown, and we may share information with a specialist we refer you to or the dental lab that makes your crown.
- **Payment.** To bill and get paid for your care. For example, we send information to your dental plan to confirm coverage and get paid for your cleaning.
- **Running our practice.** For the business side of the office, such as quality reviews, training, audits and customer service. For example, we periodically review how we document care.
- **Reminders and information about your care.** To remind you of appointments and tell you about treatment options or other health services, by phone, text, email or mail.
- **Family and friends.** With family members or friends who are involved in your care or help pay for it, unless you tell us not to.
- **Business associates.** With companies that help us run the office, such as our practice software, labs and billing services. They must protect your information under a written agreement.
- **Lawsuits and legal actions.** In response to a court or administrative order, or to a subpoena or other legal request if we've tried to tell you about the request or to get an order protecting the information.
- **Law enforcement.** With law enforcement officials when the law requires it.
- **Coroners, medical examiners and funeral directors.** To identify a person who has died, find the cause of death, or let funeral directors do their jobs.
- **Organ and tissue donation.** With organ, eye or tissue donation organizations, if you're a donor.
- **Military and national security.** With military authorities if you're a member of the U.S. or foreign armed forces, and with federal officials for intelligence and national security activities the law allows.
- **Inmates and people in custody.** With a correctional institution or law enforcement official who has custody of you, when needed for your care, the safety of the institution, or the health and safety of others.
- **Workers' compensation.** For workers' compensation and similar programs.

Uses that need your written permission

- **Marketing.** We won't use your information for marketing, including your photos or story in our advertising, without your written permission.
- **Selling information.** We never sell your information. The law wouldn't allow it without your written permission.
- **Anything else.** Any other use or sharing not described in this notice. You can take back your permission at any time by writing to us, except for anything we already did relying on it.

Stricter laws

- If Michigan law or another federal law gives some of your information more protection than HIPAA, we follow the stricter law.
- If we ever receive substance use disorder treatment records protected by federal law (42 CFR Part 2), we won't use or share them in a civil, criminal, administrative or legislative proceeding against you without your written consent or a court order.

Your rights

To use any of these rights, ask us in writing. Our Office Manager can help.

- **Get a copy of your records.** You can see or get a paper or electronic copy of your dental and health records. We'll usually provide it within 30 days of your request, and we may charge a reasonable, cost-based fee.

Other ways we may share your information

The law allows or requires us to share information in these situations, usually under specific conditions.

- **When the law requires it.** When federal, state or local law requires us to.
- **Public health and safety.** With public health authorities, for example to prevent disease or report suspected abuse or neglect, and to prevent a serious threat to someone's health or safety. We share only with someone able to help prevent the threat.
- **Health oversight.** With agencies that oversee health care, for audits, investigations, inspections and licensing.

- **Ask us to correct your records.** If you think something in your records is wrong or incomplete, you can ask us to change it. We may say no, but we'll tell you why in writing within 60 days.
- **Choose how we contact you.** You can ask us to contact you in a specific way, like a certain phone number, or at a different address. We'll say yes to all reasonable requests.
- **Ask us to limit what we use or share.** You can ask us not to use or share certain information. We don't have to agree, and we may say no if it would affect your care. If we agree, we'll follow it unless you agree in writing to remove it, or the information is needed for emergency treatment.
- **Keep self-paid care from your insurer.** If you pay for a service or item in full yourself, you can ask us not to share information about it with your health or dental plan for payment or its operations. We'll say yes unless a law requires us to share it.
- **Get a list of who we've shared your information with.** You can ask for a list of the times we've shared your information in the six years before your request, who we shared it with, and why. It won't include sharing for treatment, payment or running our practice, or sharing you asked us to make. One list a year is free; we may charge a reasonable fee for more.
- **Get a copy of this notice.** You can ask for a paper copy at any time, even if you agreed to get it electronically.
- **Choose someone to act for you.** If someone is your legal guardian or has your health care power of attorney, they can use your rights and make choices about your information. We'll check that they have that authority.

Complaints

If you think your privacy rights have been violated, you can file a complaint with us by contacting our Office Manager at Serenity Family Dentistry, PLLC, 1715 Crooks Road, Royal Oak, MI 48067, 248-398-5520.

You can also file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, online at ocrportal.hhs.gov, by email at OCRComplaint@hhs.gov, or by mail to Centralized Case Management Operations, U.S. Department of Health and Human Services, 200 Independence Avenue, S.W., Room 509F HHH Bldg., Washington, D.C. 20201. Phone: 1-877-696-6775.

We will not retaliate against you for filing a complaint.

Changes to this notice

We can change the terms of this notice, and the changes will apply to all the information we have about you. The new notice will be available at our office, on our website, and on request.

Questions

Contact our Office Manager: Serenity Family Dentistry, PLLC, 1715 Crooks Road, Royal Oak, MI 48067 · 248-398-5520 · info@serenityfamilydentist.com

Effective date: October 14, 2026