



Notice of Privacy Practices

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

We are required by federal and Pennsylvania law to maintain the privacy of your protected health information ("PHI"), to provide individuals with notice of our legal duties and privacy practices with respect to PHI, and to notify affected individuals following a breach of unsecured PHI. We must follow the privacy practices described in this Notice while it is in effect.

This Notice takes effect **February 1, 2026**, and will remain in effect until we replace it.

We reserve the right to change our privacy practices and the terms of this Notice at any time, provided such changes are permitted by applicable federal and Pennsylvania law, and to make new Notice provisions effective for all PHI that we maintain. When we make a material change to our privacy practices, we will revise this Notice and post the updated Notice prominently at our practice location, and we will make copies available upon request.

You may request a copy of this Notice at any time. For more information about our privacy practices, please contact us using the information listed at the end of this Notice.

HOW WE MAY USE AND DISCLOSE HEALTH INFORMATION ABOUT YOU

We may use and disclose your health information for the following purposes, consistent with HIPAA and applicable Pennsylvania law:

Treatment

We may use and disclose your PHI for your treatment. For example, we may disclose your PHI to a specialist or laboratory involved in your dental care.

Payment

We may use and disclose your PHI to obtain payment for services you receive. Payment activities include billing, collections, claims management, and eligibility determinations. For example, we may submit claims to your dental insurance carrier.

Health Care Operations

We may use and disclose your PHI for healthcare operations, including quality assessment, staff training, licensing, credentialing, audits, and compliance activities.

Individuals Involved in Your Care or Payment

We may disclose PHI to family members, friends, or others involved in your care or payment for your care, unless you object. If a person has legal authority to make health care decisions for you, we will treat that person as your personal representative, consistent with Pennsylvania law.



Disaster Relief

We may disclose your PHI to assist disaster relief organizations.

Required by Law

We may use or disclose your PHI when required by federal or Pennsylvania law.

SPECIAL PROTECTIONS UNDER PENNSYLVANIA AND FEDERAL LAW

Certain categories of information are subject to **heightened confidentiality protections**, and we will comply with all applicable state and federal requirements, including:

- **HIV/AIDS-related information** (Pennsylvania Confidentiality of HIV-Related Information Act)
- **Mental health records**, including psychotherapy notes (Pennsylvania Mental Health Procedures Act)
- **Drug and alcohol treatment records** protected under **42 CFR Part 2**
- **Genetic information**
- **Records of minors**, where Pennsylvania law permits minors to consent to certain types of care and restricts parental access in specific circumstances

We will not disclose these records without your written authorization unless specifically permitted or required by law.

PUBLIC INTEREST AND LEGAL DISCLOSURES

We may disclose PHI for the following purposes as permitted or required by law:

- **Public Health Activities**, including reporting disease, abuse or neglect, adverse drug reactions, product recalls, or threats to health or safety
- **Health Oversight Activities**, such as audits, investigations, inspections, and licensure reviews by state or federal agencies
- **Law Enforcement**, as required by law or in response to valid legal process
- **Judicial and Administrative Proceedings**, in response to court orders, subpoenas, or lawful discovery requests
- **Workers' Compensation**, as authorized by Pennsylvania law



- **National Security and Military Activities**
- **Coroners, Medical Examiners, and Funeral Directors**

OTHER USES AND DISCLOSURES OF PHI

Your written authorization is required for most uses and disclosures of PHI not described in this Notice, including marketing, sale of PHI, and disclosure of psychotherapy notes. You may revoke an authorization in writing at any time, except to the extent we have already relied on it.

YOUR HEALTH INFORMATION RIGHTS

In addition to rights under HIPAA, you have rights under **Pennsylvania law**, including:

Access

You have the right to inspect or obtain copies of your PHI, subject to limited exceptions. Requests must be in writing. We may charge reasonable, cost-based fees as permitted by law.

Accounting of Disclosures

You have the right to receive an accounting of certain disclosures of your PHI.

Right to Request Restrictions

You may request restrictions on certain uses or disclosures of PHI. We must agree to a restriction when you pay for a service in full out-of-pocket and request that the information not be shared with your health plan.

Confidential Communications

You may request communications by alternative means or at alternative locations. We will accommodate reasonable requests.

Amendment

You may request an amendment to your PHI. Requests must be in writing and explain the reason for the amendment.

Right to Notification of a Breach

You have the right to receive notice of any breach of unsecured PHI as required by **HIPAA and the Pennsylvania Breach of Personal Information Notification Act**.

Paper Copy



DR. COURTNEY J. LAM, DMD
FAMILY AND COSMETIC DENTISTRY

You may request a paper copy of this Notice at any time, even if you have agreed to receive it electronically.

QUESTIONS AND COMPLAINTS

If you have questions or concerns about this Notice or our privacy practices, please contact us using the information below.

You may file a complaint with:

- **Our practice**, or
- **The U.S. Department of Health and Human Services**, Office for Civil Rights
- **The Pennsylvania Department of Health**, if applicable under state law

We will not retaliate against you for filing a complaint.

PRIVACY OFFICIAL CONTACT INFORMATION

Privacy Official Name: Dr. Courtney Lam

Telephone: 717-944-3311

Address: 244 Adelia St. Middletown, PA 17057

Email: office@drlamdentistry.com