

# Salem Children's Dental Network

A Greater Derry Oral Health Collaborative Corporation program  
603-434-2327

## Notice of Privacy Practices

Effective December 1, 2010

This notice describes how medical information about your child may be used and disclosed and how you can get access to this information.

Please review it carefully.

Salem Children's Dental Network is required by law to maintain the privacy of your child's health information and to provide you with this Notice of Salem Children's Dental Network's legal duties and privacy practices with respect to your child's protected health information (PHI). Salem Children's Dental Network is required to abide by the terms of the notice currently in effect.

### How We May Use your Child's PHI

**For Treatment.** Salem Children's Dental Network (hereafter referred to as SCDN) may use your protected health information (PHI) to coordinate care with other health professionals. SCDN may notify school personnel of the need for additional dental care services or may need to contact your child's physician related to medical issues (e.g., heart murmur or organ transplant) prior to providing services. The school nurse or SCDN staff may be able to refer you to appropriate sources for needed dental care. The results of your child's screening may also be added to a central secured data base to be included in an ongoing assessment of children's dental health for the state of NH.

**For Payment.** We document the services your child receives at each visit so that you, your insurance company or another third party can pay us. We may include your child's PHI to collect payment or receive prior approval for treatment from Medicaid, your insurance company, or another third party.

**Health Care Operations.** We may use or disclose PHI in order to facilitate the general administration of our program. For example, your child's health information may be used to evaluate staff performance or it may be combined with that of others to evaluate how to more effectively serve program recipients.

**Business Administration.** We may share your child's PHI with third-party "business associates" who perform activities for us (e.g. billing). Whenever an arrangement with a business associate involves the use or disclosure of PHI, we will have a written contract that contains terms that will protect the privacy of this PHI.

### Other Uses and Disclosures

**As Required by Law.** SCDN will disclose your child's PHI when required to do so by any federal, state or local law.

**Public Health and Communicable Disease.** We may disclose your child's PHI for public health reasons, activities and purposes in order to prevent or control disease, injury or disability or to report reactions to products regulated by the Food and Drug Administration, or to notify a person who has been exposed to a communicable disease or who may be at risk of contracting or spreading disease.

**To Report Abuse, Neglect or Domestic Violence.** SCDN professionals are required by law to notify government authorities if they believe a patient is the victim of abuse, neglect or domestic violence.

**Legal Proceedings and Law Enforcement.** We may disclose PHI in the course of any judicial or administrative proceeding in response to an order of a court or

administrative tribunal as expressly authorized by such order or in response to a subpoena, discovery request or other unlawful process. SCDN may disclose your child's PHI to law enforcement officials for certain law enforcement purposes such as locating a missing person or under certain limited circumstances, when your child is the victim of a crime.

**Research, Health and Safety, and Certain Specialized Government Functions.** SCDN may in certain circumstances share PHI with coroners or funeral directors; for research purposes; or to avert a serious threat to the public. PHI may be shared for specialized government functions such as disclosures related to military personnel and veterans; national security and intelligence gathering; medical suitability determinations; correctional institutions and other law enforcement custodial situations; government programs providing public benefits; and disclosures related to Workman's Compensation.

**Required Uses and Disclosure.** Under the law, we must make disclosures to you, with certain exceptions, and when required by the Secretary of the Department of Health and Human Services to investigate or determine our compliance with the law.

**Authorized Uses and Disclosures.** Additional uses and disclosures may be made if you have given written authorization, which may be

revoked at any time in writing delivered to the site compliance contact, except to the extent SCDN acted in reliance on the authorization.

### **Your Rights**

**Restrictions.** You have the right to request restriction on the use and disclosure of your child's PHI; however, SCDN will be bound by the restrictions only if you are notified in writing that SCDN has agreed to the requested restriction.

**Confidentiality.** You have the right to have SCDN use only confidential means of communicating with you about your child's PHI. This means you may have information mailed to your home instead of sent home with your child.

**Access.** You have the right to see and receive a copy of the PHI kept about your child by SCDN under most circumstances.

**Amendment.** You have the right to have SCDN amend its records of PHI about your child. The program may refuse to amend information that is accurate, that was created by someone else or is not disclosable to you.

**Accounting.** You have the right to see a list of disclosures of PHI about your child, which includes the purposes and recipients of the information.

**Copy.** You have the right to receive a paper copy of this notice.

**Privacy Notice.** SCDN is required by law to keep PHI about your child private and to give you this notice; however, **SCDN reserves the right to amend this notice and make such change applicable to all health information maintained without prior notice.** A revised notice will be provided to schools included in the SCDN program.

**Complaints.** You may complain to SCDN or Greater Derry Oral Health Collaborative Corporation if you believe your child's privacy rights have been violated by giving written complaint. All complaints will be thoroughly investigated; patients will not suffer retaliation for filing a complaint. You may also file a complaint with the Secretary of Health and Human Services in Washington, D.C.

### ***To Contact Us.***

If you would like to exercise your rights or if you feel your rights have been violated:

**Contact:** Salem Children's Dental Network at 603-434-2327.

**Address:** Greater Derry Oral Health Collaborative Corporation, Derry Village School, 28 S. Main Street, Derry, NH 03038