Notice of Privacy Practices

Dr. Spencer Wade, PLLC provides dental anesthesia services and is committed to protecting the privacy of your health information. We are required by law to maintain the privacy of your protected health information (PHI), provide you with this notice of our legal duties and privacy practices, and abide by the terms of this notice.

How We May Use and Disclose Your Health Information:

- **Treatment**: We may use your PHI to provide anesthesia services and coordinate your care with other healthcare providers involved in your treatment.
- **Payment**: We may use and disclose PHI to obtain payment for the services we provide, including billing insurance companies or third-party payers.
- **Healthcare Operations**: We may use your PHI for administrative purposes, such as quality assessment, compliance reviews, and provider credentialing.
- **Required by Law**: We may disclose PHI when required by law, including public health reporting, regulatory oversight, and legal proceedings.
- **Emergency Situations**: In case of a medical emergency, we may disclose necessary PHI to ensure appropriate medical care.
- **Business Associates**: We may share your PHI with third parties that assist us in performing our services, provided they agree to safeguard your information.

Your Rights Regarding Your Health Information:

- **Access to Records**: You may request a copy of your health records, subject to reasonable fees as allowed by law.
- **Request Restrictions**: You may ask us to limit the use or disclosure of your PHI, though we may not be able to comply in all cases.
- **Confidential Communications**: You may request that we contact you in a specific way (e.g., only at work or via email).
- **Amendment Requests**: If you believe your PHI is incorrect, you may request an amendment, though we may deny the request in certain situations.
- **Accounting of Disclosures**: You may request a list of disclosures of your PHI that were made outside of treatment, payment, or healthcare operations.
- **File a Complaint**: If you believe your privacy rights have been violated, you may file a complaint with us or with the U.S. Department of Health & Human Services. We will not retaliate against you for filing a complaint.

On the day of your procedure, we will ask you to sign an acknowledgment form confirming that you have received and reviewed the Notice of Privacy Practices. This is a legal requirement for us to proceed with your treatment.

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