

Notice of Privacy Practices

Your information. Your rights. Our responsibilities.

This notice describes how health information about you may be used and disclosed, and how you can get access to it. Please review it carefully.

Effective date and scope

Effective date: September 1, 2026

Applies to: Mars Family Dental

221 Crowe Ave
Mars, PA 16046

Privacy contact

Privacy Officer

Phone: (724) 625-2530

Mail: 221 Crowe Ave, Mars, PA 16046

Web: marsfamilydental.com

Your rights

- Get an electronic or paper copy of your health record.
- Ask us to correct your health record.
- Request confidential communications.
- Ask us to limit what we use or share.
- Get a list of certain disclosures.
- Get a copy of this notice.
- Choose someone to act for you.
- File a complaint without retaliation.

Your choices

- Tell us how to share information with family, friends, or others involved in your care.
- Tell us how to share information in a disaster relief situation.
- Give or withhold written permission for marketing, sale of information, and most uses of psychotherapy notes.
- Opt out of fundraising communications if we ever contact you for fundraising.

Our uses and disclosures

- Treat you and coordinate your care.
- Run our practice and improve care.
- Bill for services and obtain payment.
- Address public health, safety, oversight, and legal requirements.
- Respond to workers' compensation, law enforcement, court, and government requests when permitted or required.

Our responsibilities

- Protect the privacy and security of your protected health information.
- Notify you promptly after certain breaches.
- Follow the duties and practices in this notice.
- Use or share information only as described here or as you authorize in writing.

Your rights

When it comes to your health information, you have certain rights. This section explains those rights and some of our responsibilities to help you.

Get an electronic or paper copy of your health record

- You can ask to see or get an electronic or paper copy of your health record and other health information we have about you. Ask us how to do this.
- We will provide a copy or summary, usually within 30 days. We may charge a reasonable, cost-based fee.

Ask us to correct your health record

- You can ask us to correct health information about you that you believe is incorrect or incomplete. Ask us how to do this.
- We may deny your request, but we will tell you why in writing within 60 days.

Request confidential communications

- You can ask us to contact you in a specific way, such as at home, at work, or on a cell phone, or to send mail to a different address.
- We will agree to reasonable requests.

Ask us to limit what we use or share

- You can ask us not to use or share certain information for treatment, payment, or our operations. We generally do not have to agree, and we may deny the request if it could affect your care. If we agree, we may still share the information for emergency treatment.
- If you pay in full out of pocket for a service or health care item, you can ask us not to share that information with your health insurer for payment or our operations. We will agree unless a law requires us to share it.

Get a list of certain disclosures

- You can ask for an accounting of certain times we shared your health information during the six years before your request, including who received it and why.
- The accounting will not include disclosures for treatment, payment, health care operations, or certain other disclosures. We will provide one accounting in a 12-month period at no charge and may charge a reasonable, cost-based fee for another.

Get a copy of this notice

You can ask for a paper copy at any time, even if you agreed to receive it electronically. We will provide one promptly.

Choose someone to act for you

- If a person has legal authority to act for you, such as under a medical power of attorney or guardianship, that person can exercise your rights and make choices about your health information.
- We will verify that authority before taking action.

File a complaint if you believe your rights were violated

- Contact our Privacy Officer using the information on page 1.
- You may also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by writing to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting the [HHS complaint page](#).
- We will not retaliate against you for filing a complaint.

A note about requests Call the office at (724) 625-2530 and ask for the Privacy Officer. We will explain how to submit a request and what information we need to respond.

Your choices

For certain health information, you can tell us your choices about what we share. Tell us your preference and we will follow your instructions when the law gives you that choice.

You may tell us to

- Share information with family, close friends, or others involved in your care or payment for your care.
- Share information in a disaster relief situation.

If you cannot tell us your preference, such as when you are unconscious, we may share information when we believe it is in your best interest. We may also share information when needed to reduce a serious and imminent threat to health or safety.

We need your written permission for

- Marketing purposes, except as otherwise permitted by law.
- The sale of your health information.
- Most uses and disclosures of psychotherapy notes, if we maintain them.

Fundraising

- If we contact you for fundraising, you can tell us not to contact you again.
- If we have substance use disorder patient records protected by 42 CFR part 2, we will give you clear advance notice and a choice before using Part 2 information for fundraising communications.

How we use and share your information

We typically use or share health information in the following ways.

Treat you

We can use your information and share it with dentists, physicians, specialists, laboratories, pharmacies, and other professionals who are treating you or coordinating your care.

Example: We share an X-ray with a dental specialist who is evaluating your treatment.

Run our practice

We can use and share your information to operate our practice, improve care, train our workforce, conduct quality reviews, and contact you when necessary.

Example: We use health information to manage your treatment and our services.

Bill for your services

We can use and share your information to bill and obtain payment from health plans or other entities.

Example: We give information about your dental treatment to your insurer so it can process a claim.

Work with service providers

We may share information with business associates that perform services for us, such as billing, records, technology, or professional support. They must appropriately protect the information they receive.

Other permitted or required uses

The law permits or requires us to share information in other ways, often for public health, safety, oversight, or legal purposes. We must meet applicable legal conditions before doing so.

Help with public health and safety

- Prevent or control disease and assist with public health activities.
- Help with product recalls or report adverse reactions to medications.
- Report suspected abuse, neglect, or domestic violence when permitted or required.
- Prevent or reduce a serious threat to anyone's health or safety.

Research

We can use or share information for health research when the law's conditions are met.

Comply with the law and health oversight

- We will share information when state or federal law requires it, including with HHS when it is reviewing our compliance with federal privacy law.
- We may share information with health oversight agencies for activities authorized by law, such as audits, investigations, inspections, and licensing matters.

Additional uses, protections, and responsibilities

Organ donation, death, and funeral services

- We can share information with organ procurement organizations.
- We can share information with a coroner, medical examiner, or funeral director when a person dies.

Workers' compensation, law enforcement, and government functions

- We can use or share information for workers' compensation claims.
- We can share information for law enforcement purposes or with a law enforcement official when the law permits or requires it.
- We can share information for special government functions, including military, national security, and presidential protective services.

Lawsuits and legal actions

We can share information in response to a court or administrative order or, when legal requirements are met, in response to a subpoena.

Pennsylvania and other more protective laws

Certain information may have additional protection under Pennsylvania or federal law, including certain HIV-related information, mental health records, and substance use disorder records. When another law provides greater privacy protection, we will follow the more protective requirement and obtain authorization when required.

Substance use disorder patient records

To the extent we create, maintain, receive, or transmit substance use disorder patient records protected by 42 CFR part 2, we will not use or disclose those records in civil, criminal, administrative, or legislative investigations or proceedings against you unless you give written consent or the disclosure is authorized by a court order and subpoena as required by law.

Our responsibilities

- We are required by law to maintain the privacy and security of your protected health information.
- We will notify you promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and provide you with a copy.
- We will not use or share your information other than as described in this notice unless you authorize us in writing. You may revoke that authorization in writing at any time, except to the extent we have already acted on it.

Changes to this notice

We may change the terms of this notice. Changes may apply to all information we have about you, including information created or received before the change. The current notice will be available upon request, in our office, and on marsfamilydental.com.

Questions, requests, or complaints

Contact the Privacy Officer at Mars Family Dental by calling (724) 625-2530 or writing to 221 Crowe Ave, Mars, PA 16046. Please do not send health, insurance, billing, or appointment information through ordinary email.

This notice was adapted for Mars Family Dental from the U.S. Department of Health and Human Services, Office for Civil Rights, Model Notice of Privacy Practices for HIPAA Covered Health Care Providers, revised February 2026. See the [HHS model notice page](#).