LA LUXE
DENTAL

Notice of Privacy Practices

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.

La Luxe Dental · 1050 First St NE, Suite 101, Washington, DC 20002 · 202-918-1204 · laluxedentalwashingtondc.com
Effective date: October 7, 2026

Our promise to you

Your health information is private, and we protect it. Federal law (HIPAA) requires us to:

- Keep your protected health information (PHI) private. PHI is any information that identifies you and relates to your health, dental care, or payment for care.
- Give you this notice of our legal duties and privacy practices.
- Follow the notice that is currently in effect.
- Tell you if a breach puts your unsecured health information at risk.

How we use and share your information

We use and share your information to care for you, get paid, and run our practice.

- **Treatment.** We share information with others who care for you. *Example*: we send your x-rays to a specialist we refer you to, or your case details to a dental lab.
- **Payment.** We use and share information to bill and get paid. *Example*: we send details about your visit to your dental insurance plan.
- **Running our practice (health care operations).** We use information to improve care and run our office. *Examples*: reviewing quality of care, training our team, sending appointment reminders by phone, text, or email, calling your name in our Guest lounge, and telling you about treatment options or services that may interest you.
- **Business associates.** Some companies help us, such as our dental software, billing, and IT providers. They must sign a contract that requires them to protect your information.
- **Family and friends.** If you agree, or do not object, we may share information with a family member, friend, or caregiver involved in your care or in paying for it. In an emergency, or if you cannot speak for yourself, we will use our best judgment.

Other times we may share without your written permission

The law allows or requires us to share your information in these cases, only as much as needed:

- **When the law requires it.**
- **Public health,** such as reporting disease, reactions to medicines, or product recalls.
- **Abuse, neglect, or domestic violence.** DC law requires dentists to report suspected child abuse or neglect, and abuse of vulnerable adults.
- **Health oversight,** such as audits, inspections, and licensing reviews.
- **Lawsuits and legal actions,** in response to a court order, subpoena, or other lawful request.
- **Law enforcement,** for limited purposes allowed by law.

- **Coroners, medical examiners, and funeral directors.**
- **Organ and tissue donation.**
- **Research,** when special privacy protections are in place.
- **To prevent a serious threat** to someone's health or safety.
- **Government functions,** such as military, national security, and protective services.
- **Workers' compensation** claims.
- **Inmates,** if you are in the custody of a correctional facility or law enforcement.
- **The U.S. Department of Health and Human Services,** when it checks that we follow privacy law.

Once we share information as the law allows, the person who receives it may share it again, and it may no longer be protected by HIPAA.

When we need your written permission

We will not do the following unless you give us written permission (an authorization):

- Use or share your information for marketing.
- Sell your information.
- Share psychotherapy notes (we do not keep these).
- Use or share your information in any way not described in this notice.

You can take back (revoke) your permission at any time, in writing. This does not undo anything we already did based on your permission.

Fundraising. We do not fundraise. If we ever contact you to raise funds, you have the right to opt out, and you can opt back in later.

Substance use disorder records. If we receive records from a federally assisted substance use disorder treatment program (covered by 42 CFR Part 2), we follow those stricter rules. These records will not be used or shared in any civil, criminal, administrative, or legislative proceeding against you unless you give written consent, or a court orders it after notice and a subpoena or other legal requirement. If we ever fundraise, you will get a clear chance to opt out before we use these records for that purpose.

Your rights

To use any of these rights, contact our Privacy Officer (below).

- **Get a copy of your records.** You may see or get a paper or electronic copy of your dental and billing records. We will respond within 30 days. We may charge a reasonable, cost-based fee.
- **Ask us to correct your records.** Ask in writing if you think something is wrong or missing. We will respond within 60 days. If we say no, we will tell you why in writing, and you may file a statement of disagreement.
- **Ask for private communication.** You may ask us to contact you a certain way (for example, by cell phone only) or at a different address. We will say yes to reasonable requests.
- **Ask us to limit what we use or share.** We do not have to agree, with one exception: if you pay for a service in full out of pocket and ask us not to share it with your health plan, we will agree unless the law requires us to share it.
- **Get a list of who we shared your information with.** You may ask for a list of disclosures made in the past 6 years. It will not include treatment, payment, practice operations, or disclosures you approved. The first list in any 12 months is free.
- **Get a paper copy of this notice** at any time, even if you agreed to get it electronically.
- **Choose someone to act for you.** A legal guardian or someone with your medical power of attorney may use these rights for you.
- **Be notified of a breach** that affects your unsecured information.
- **File a complaint** if you feel your rights were violated (see below).

Changes to this notice

We may change this notice, and the changes will apply to all information we have about you. The current notice is posted in our office and on our website, and you can ask us for a copy anytime.

Questions or complaints

If you have questions, or believe your privacy rights were violated, contact us or the U.S. Department of Health and Human Services. **We will never penalize or retaliate against you for filing a complaint.**

La Luxe Dental	U.S. Department of Health and Human Services
Privacy Officer: Dr. Ashley D. Fagan 1050 First St NE, Suite 101 Washington, DC 20002 202-918-1204 smile@laluxedental.com	Office for Civil Rights 200 Independence Avenue SW Washington, DC 20201 1-877-696-6775 ocrportal.hhs.gov