MARKIEWICZ DENTAL

Notice of Privacy Practices

Effective Date: February 16, 2026

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.

1 OUR LEGAL DUTY

Markiewicz Dental is required by law to:

- Maintain the privacy of your Protected Health Information ("PHI")
- Provide you with this Notice
- Follow the terms of this Notice currently in effect
- Notify you in the event of a breach of unsecured PHI

We reserve the right to revise this Notice and make changes effective for all PHI we maintain. Revised notices will be posted in our office and on our website and will contain a new effective date.

2 HOW WE MAY USE AND DISCLOSE YOUR HEALTH INFORMATION

We may use and disclose your PHI **without written authorization** for the following purposes:

A. Treatment

- Diagnosis and treatment planning
- Consultation with specialists
- Referrals
- Radiographic interpretation
- Laboratory services
- Care coordination

B. Payment

- Submitting claims to insurers
- Verifying benefits & eligibility
- Obtaining prior authorizations
- Collecting outstanding balances
- Coordination of benefits

C. Health Care Operations

- Quality assurance & chart audits
- Compliance monitoring
- Risk analysis
- Staff training
- Credentialing
- Business management
- Administrative oversight

3 TECHNOLOGY & ELECTRONIC SYSTEMS

Markiewicz Dental utilizes secure electronic systems, including:

- Cloud-based Practice Management Software
- Digital radiography and imaging platforms
- Encrypted data storage and backup systems
- Multi-factor authentication (MFA) secured system access
- Role-based access controls
- Secure vendor integrations

All vendors with access to PHI operate under Business Associate Agreements (BAAs) in compliance with HIPAA.

4 AI-ASSISTED DOCUMENTATION & ANALYTICS

We may utilize HIPAA-compliant artificial intelligence (AI) tools to assist with:

- Clinical documentation transcription and Scribes
- Administrative workflow support
- Operational analytics
- Quality assurance review

AI tools:

- Operate under HIPAA-compliant contractual safeguards
- Do not replace clinical judgment
- Do not independently train on patient data without authorization
- Are subject to compliance and access controls

5 ELECTRONIC COMMUNICATIONS

We may contact you via text message reminders, email communications, patient portal messaging, and electronic billing notifications.

While we implement reasonable safeguards, electronic communications may involve inherent privacy risks.

You may:

- Request alternative communication methods
- Request confidential communications
- Opt out of text or email reminders

6 SUBSTANCE USE DISORDER (SUD) RECORDS

Certain records relating to substance use disorder treatment, if applicable, may be protected under federal law (42 CFR Part 2), which provides heightened confidentiality protections beyond HIPAA.

Such records may not be disclosed without your written authorization except as permitted by law. Federal law prohibits unauthorized redisclosure of substance use disorder treatment information.

Violations of federal SUD confidentiality laws may be reported to the U.S. Department of Health and Human Services. Where applicable, these protections apply in addition to HIPAA and Illinois law.

7 USES AND DISCLOSURES REQUIRING YOUR WRITTEN AUTHORIZATION

Other uses and disclosures of your PHI not described in this Notice will be made only with your written authorization.

You have the right to revoke your authorization at any time in writing, except where we have already acted in reliance on it.

Uses and disclosures that **always** require written authorization include:

- **Marketing communications.** We will not use or disclose your PHI for marketing purposes without your written authorization, except for face-to-face communications or promotional gifts of nominal value.
- **Sale of PHI.** We will not sell your PHI without your written authorization. This includes exchanges for remuneration of any kind.
- **Psychotherapy notes.** To the extent psychotherapy notes are maintained in connection with your care, their use or disclosure requires separate written authorization except in limited circumstances permitted by law.

8 OTHER PERMITTED DISCLOSURES

We may disclose PHI without authorization when required by law, including:

- Public health reporting
- Court orders or subpoenas
- Workers' compensation claims
- Health oversight activities
- Abuse or neglect reporting
- Law enforcement requests
- National security purposes

9 ILLINOIS-SPECIFIC PRIVACY PROTECTIONS

Your health information is also protected under Illinois law, including:

- Illinois Mental Health and Developmental Disabilities Confidentiality Act
- Illinois HIV/AIDS Confidentiality Act
- Minor consent confidentiality protections
- Illinois Biometric Information Privacy Act

When Illinois law provides greater privacy protection than federal law, we will follow Illinois law.

10 YOUR RIGHTS REGARDING YOUR HEALTH INFORMATION

You have the following rights regarding your Protected Health Information (PHI):

Inspect and Obtain a Copy	You have the right to inspect and obtain a copy of your PHI in paper or electronic format, if readily producible in that format. We will respond to your written request as soon as possible, but no later than 30 days after receipt. Digital imaging and radiographs are maintained electronically and may be provided electronically or printed. We may charge a reasonable, cost-based fee as permitted by law. You also have the right to direct us to transmit a copy to a designated third party.
Request Amendment	You have the right to request an amendment to your PHI if you believe it is inaccurate or incomplete. We may deny your request under certain circumstances but will provide a written explanation of the denial.
Request Restrictions	You have the right to request restrictions on certain uses or disclosures of your PHI. If you pay for a service entirely out of pocket and request that we not disclose information related to that service to your health plan, we are **required by law** to honor that restriction unless disclosure is otherwise required by law.

Confidential Communications	You have the right to request that we communicate with you about your health information by alternative means or at an alternative location.
Accounting of Disclosures	You have the right to receive a written accounting of certain disclosures of your PHI made within the six (6) years prior to the date of your request.
Receiving Electronic Copies	If your PHI is maintained electronically, you have the right to request an electronic copy in a form and format that is readily producible.
Breach Notification	You have the right to be notified in the event of a breach of unsecured PHI.
Obtain a Paper Copy of This Notice	You have the right to obtain a paper copy of this Notice at any time, even if you have agreed to receive it electronically.
Personal Representatives	You may exercise your rights under this Notice through a personal representative authorized by law to act on your behalf.

11 BREACH NOTIFICATION

In the event of a breach of unsecured PHI, you will be notified:

- Without unreasonable delay
- No later than 60 days after discovery
- In accordance with federal and Illinois law

If required, appropriate notifications will also be made to the U.S. Department of Health and Human Services and, when applicable, to the media.

12 MINIMUM NECESSARY STANDARD

We limit access to PHI to the minimum necessary workforce members required to perform their job duties.

Security safeguards include:

- Multi-factor authentication
- Role-based system permissions
- Periodic access audits
- Routine risk assessments
- Vendor oversight procedures

13 COMPLAINTS

If you believe your privacy rights have been violated, you may file a complaint with:

Privacy Officer	U.S. Dept. of Health & Human Services
Anthony Markiewicz	**Office for Civil Rights**
Markiewicz Dental	www.hhs.gov/ocr/privacy/hipaa/complaints/
847.566.2811	200 Independence Avenue, S.W.
Tony@Markiewicz.dental	Washington, D.C. 20201

You will not be retaliated against for filing a complaint.

14 EFFECTIVE DATE

This Notice is effective **February 16, 2026**.

Document Revision History

Version	Date	Description of Revision	Approved By
1.0	February 16, 2026	Initial 2026 OCR-Ready Release	Privacy Officer