

NOTICE OF PRIVACY PRACTICES
***THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE
USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS
INFORMATION.***

Effective Date: September 1, 2026

OUR LEGAL DUTY

This Notice describes how Smith Valley Smiles may use and disclose your Protected Health Information (PHI) and your rights regarding that information. PHI includes information that identifies you and relates to your past, present, or future physical or mental health condition, dental treatment, or payment for health care services.

We are required by federal law under the **Health Insurance Portability and Accountability Act (HIPAA)**, including the HIPAA Privacy Rule, Security Rule, and the **HIPAA Omnibus Rule**, 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 as required by federal breach notification laws.

HOW WE MAY USE AND DISCLOSE YOUR HEALTH INFORMATION

Treatment

We may use and disclose your health information to provide, coordinate, or manage your dental care. For example, we may share information with dental specialists, physicians, laboratories, or pharmacies involved in your care.

Payment

We may use and disclose your health information to obtain payment for treatment and services. This may include submitting claims to dental insurance companies, verifying benefits, and collection activities.

Healthcare Operations

We may use and disclose your information for administrative and operational purposes including quality assessment, staff training, licensing, accreditation, and compliance reviews.

OTHER PERMITTED DISCLOSURES

We may disclose health information without written authorization in certain situations including:

- Appointment reminders
- Treatment alternatives or health-related benefits
- Individuals involved in your care
- Public health reporting
- Health oversight activities
- Legal proceedings or court orders
- Law enforcement requests
- Situations required by federal, state, or local law

NEVADA SPECIFIC PRIVACY PROTECTIONS

Nevada law may provide additional privacy protections beyond federal HIPAA regulations. Under Nevada law, certain health information may require additional authorization before disclosure, including information related to HIV/AIDS, substance abuse treatment, mental health treatment, and genetic testing results.

Nevada Revised Statutes (NRS) also require health care providers to maintain the confidentiality of patient records and limit disclosures without patient consent except where specifically authorized by law.

Andrea N. Leinassar D.D.S. PLLC
Smith Valley Smiles
2311 State Route 208 P.O. Box 305 Smith, NV 89430

USES AND DISCLOSURES REQUIRING AUTHORIZATION

Certain uses and disclosures require your written authorization including:

- Marketing communications where the practice receives financial compensation
- Sale of protected health information
- Most uses of psychotherapy notes (if applicable)
- Any uses not described in this notice, you may revoke your authorization at any time in writing.

YOUR RIGHTS REGARDING YOUR HEALTH INFORMATION

You have the following rights under HIPAA:

- **Right to Inspect and Copy** – You may request copies of your health records.
- **Right to Request Restrictions** – You may request limits on certain uses or disclosures.
- **Right to Request Confidential Communications** – You may ask us to contact you in a specific way.
- **Right to Amend** – You may request correction of inaccurate or incomplete information.
- **Right to an Accounting of Disclosures** – You may request a list of certain disclosures.
- **Right to a Paper Copy** – You may obtain a paper copy of this notice at any time.

COMPLAINTS

If you believe your privacy rights have been violated, you may file a complaint with our Privacy Officer. You may also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights. You will not be retaliated against for filing a complaint.

CONTACT INFORMATION

Privacy Officer: Andrea N. Leinassar
Phone: 775-465-2388

Practice Name: Andrea N. Leinassar DDS
Address: PO Box 305 2311 SR 208