

Notice of Privacy Practices

Lakeland Periodontics & Implant Dentistry Effective Date: April 22, 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.

Our Legal Duty

At **Lakeland Periodontics & Implant Dentistry**, we are required by applicable federal and state law to maintain the privacy of your Protected Health Information (PHI). We are also required to give you this Notice about our privacy practices, our legal duties, and your rights concerning your PHI.

Uses and Disclosures of Health Information

We may use and disclose your health information for different purposes. Examples include:

- **Treatment:** We may disclose your PHI to a specialist, your general dentist, or other healthcare providers providing treatment to you.
- **Payment:** We may use and disclose your PHI to obtain payment for services we provide to you (e.g., submitting claims to your dental insurance).
- **Healthcare Operations:** We may use and disclose your PHI in connection with our healthcare operations, such as quality assessment and improvement activities and provider reviews.
- **Appointment Reminders:** We may disclose your PHI to contact you as a reminder that you have an appointment (via voicemail, text, or email).

Special Protections & 2026 Updates

- **Substance Use Disorder (SUD) Records:** In accordance with updated federal regulations (42 CFR Part 2), any SUD records received from a Part 2 program are strictly protected. We will not re-disclose these records without your specific written consent except in medical emergencies or as required by law.
- **Breach Notification:** In the event of a breach of unsecured PHI, we will notify you promptly as required by law.

Your Individual Rights

- **Access:** You have the right to look at or get copies of your health information. As of 2026, you have a strengthened right to receive these records in your preferred **electronic format** if we maintain them digitally.
- **Disclosure Accounting:** You have the right to receive a list of instances in which we disclosed your PHI for purposes other than treatment, payment, or healthcare operations.
- **Restriction:** You have the right to request that we place additional restrictions on our use or disclosure of your PHI. If you pay for a procedure **out-of-pocket in full**, we must agree to your request not to disclose that information to your health insurer.
- **Amendment:** You have the right to request that we amend your health information if you believe it is incorrect or incomplete.

Questions and Complaints

If you want more information about our privacy practices or have questions, please contact us. If you are concerned that we may have violated your privacy rights, you may complain to us using the contact information below:

Contact Officer: Jen Swanson

Address: 3003 Florida Ave S, Suite 201, Lakeland, FL 33803

Telephone: (863) 687-9227

Fax: 863-687-2813