

# NOTICE OF PRIVACY PRACTICES

## **Robert N Hanson DDS PC**

Doing Business As: **Hanson Dentistry**

3151 S State Route 291, Suite A

Independence, Missouri 64057

Phone: 816-373-5606

Email: Team@roberthansondds.com

**Effective Date: February 16, 2026**

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**THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN ACCESS THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.**

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## OUR LEGAL DUTIES

Robert N Hanson DDS PC, doing business as Hanson Dentistry (“we,” “our,” or “the Practice”), is required by the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”), as amended, and applicable Missouri law to:

- Maintain the privacy of your protected health information (“PHI”);
- Provide you with this Notice of our legal duties and privacy practices;
- Abide by the terms of this Notice currently in effect; and
- Notify you following a breach of unsecured PHI as required by law.

We reserve the right to change the terms of this Notice at any time. Any revised Notice will apply to all PHI we maintain and will be made available in our office and on our website.

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## 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 diagnostic records or treatment information with a dental specialist for referral purposes.

### Payment

We may use and disclose your information to obtain payment for services provided to you, including submitting claims to dental insurance carriers or discussing payment arrangements.

### Health Care Operations

We may use and disclose your information for health care operations necessary to run our practice, including:

- Quality assessment and improvement
- Staff training and credentialing
- Licensing and accreditation activities
- Business planning and administrative services

We may share PHI with third-party service providers (“business associates”) who perform functions on our behalf. These business associates are required by written agreement and federal law to safeguard your information.

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## COMMUNICATIONS

We may use business associates to assist with patient communications, electronic forms, and administrative services.

We may contact you via:

- Text message
- Email

- Telephone call
- Voicemail

for purposes including:

- Appointment reminders
- Treatment follow-up
- Billing and payment matters
- Practice-related communications

Electronic communications may not always be encrypted and may carry some risk of disclosure. Standard messaging and data rates may apply. You may request alternative methods or locations for communication at any time.

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## ONLINE INTAKE FORMS

We offer secure electronic intake and health history forms. Information submitted electronically is transmitted and maintained in accordance with HIPAA security requirements.

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## USES AND DISCLOSURES REQUIRED OR PERMITTED BY LAW

We may disclose your health information without your authorization when required or permitted by law, including for:

- Public health reporting
- Reporting abuse or neglect
- Health oversight activities
- Judicial or administrative proceedings
- Law enforcement purposes
- Preventing serious threats to health or safety
- Workers' compensation claims
- Coroners, medical examiners, or funeral directors

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## SPECIAL PROTECTIONS FOR SUBSTANCE USE DISORDER RECORDS

Federal regulations at 42 CFR Part 2, as revised and effective February 16, 2026, provide additional protections for certain substance use disorder (“SUD”) treatment records.

Hanson Dentistry does not provide specialized substance use disorder treatment services. However, if we receive or maintain records subject to 42 CFR Part 2:

- Such records may not be used or disclosed without your written authorization except as expressly permitted by federal law;
- These records generally may not be disclosed in civil, criminal, administrative, or legislative proceedings without your written consent or a specific court order; and
- Redisclosure of such information may be prohibited by federal law.

Where applicable, we will comply with both HIPAA and 42 CFR Part 2.

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## USES AND DISCLOSURES REQUIRING AUTHORIZATION

We will obtain your written authorization for uses and disclosures not otherwise described in this Notice, including:

- Marketing communications not related to treatment or health care operations;
- Sale of protected health information.

You may revoke your authorization at any time in writing, except to the extent we have already relied upon it.

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## YOUR RIGHTS

You have the following rights regarding your PHI:

### **Right to Inspect and Obtain a Copy**

You may request access to your dental records in paper or electronic format.

### **Right to Request Amendment**

You may request an amendment to information you believe is inaccurate or incomplete.

### **Right to Request Restrictions**

You may request restrictions on certain uses or disclosures of your PHI. We are not required to agree to all requests, except as required by law.

### **Right to Confidential Communications**

You may request that we communicate with you by alternative means or at alternative locations.

### **Right to an Accounting of Disclosures**

You may request a list of certain disclosures of your PHI made in the past six years.

### **Right to a Paper Copy**

You have the right to receive a paper copy of this Notice at any time.

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## **MINORS**

Under Missouri law, parents or legal guardians generally have rights regarding a minor child's dental records, except as otherwise limited by applicable law.

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## **ACCESSIBILITY AND ACCOMMODATIONS**

Hanson Dentistry is committed to providing equal access to our services and communications in accordance with the Americans with Disabilities Act (ADA).

If you require:

- This Notice in an alternative format;
- Assistance due to a disability; or
- Auxiliary aids or services,

please contact us at 816-373-5606 or [Team@roberthansondds.com](mailto:Team@roberthansondds.com). We will provide reasonable accommodations as required by law.

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# COMPLAINTS

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

Privacy Officer

Dr. Steven Blum, DDS

Hanson Dentistry

3151 S State Route 291, Suite A

Independence, MO 64057

Phone: 816-373-5606

Email: [Team@roberthansondds.com](mailto:Team@roberthansondds.com)

You may also file a complaint with the U.S. Department of Health & Human Services, Office for Civil Rights, at:

200 Independence Avenue, S.W.

Washington, D.C. 20201

1-877-696-6775

[www.hhs.gov/ocr/privacy/hipaa/complaints/](http://www.hhs.gov/ocr/privacy/hipaa/complaints/)

You will not be retaliated against for filing a complaint.