

HIPAA – Acknowledgment of Receipt of Notice of Privacy Practices

As of April 2003, the Health Information Portability and Accountability Act (HIPAA) took effect and we want you to know that we take this seriously. Our office is HIPAA compliant when handling your private health information. We may at times be required to electronically submit your information related to insurance claims or in association with treatment in conjunction with another healthcare provider or interested party. Our record systems are secure and we make every effort to monitor and protect the distribution of any of your sensitive private health information. We will not, without your consent, share any private health information with others. We may use or disclose health information about you when contacting you to remind you of a dental appointment or to discuss finances. We may contact you by using a letter, voicemail, text or e-mail. To see the complete HIPAA compliance statement, see our front desk.

Consent of Health Information

In the event that I, _____, cannot accompany my child to their dental visit I give consent for the following individuals to accompany them. Additionally, I give consent for the listed individuals to sign for any scheduled treatment.

1.
2.
3.

I understand that if any of the above information changes, it is my responsibility to notify the staff of My Kids’ Dentists.

**Note: If your child is sixteen (16) years of age or older and will be attending their appointment alone or any person(s) not listed above will be accompanying them, please send a signed note allowing for consent.*

**Any child under the age of eighteen (18) MUST be accompanied for any treatment appointments. This does not include cleanings and exams.*

Acknowledgement

I acknowledge that I have read and understand the above information. I hereby authorize My Kids’ Dentists to release any medical information required for payment or insurance claims review. I understand and agree with above statements.

Parent/Guardian Signature

Date