

NOTICE OF PRIVACY PRACTICES

Houston TMJ Facial Pain and Sleep PLLC

Effective Date: February 16, 2026

This Notice of Privacy Practices describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

YOUR RIGHTS

When it comes to your health information, you have certain rights. This section explains your rights and some of our responsibilities to help you.

- **Get an electronic or paper copy of your medical record**
- **Ask us to correct your medical record**
- **Request confidential communications**
- **Ask us to limit what we use or share**
- **Get a list of those with whom we've shared information**
- **Get a copy of this privacy notice**
- **Choose someone to act for you**
- **File a complaint if you feel your rights are violated**

We will not retaliate against you for filing a complaint.

YOUR CHOICES

For certain health information, you can tell us your choices about what we share. If you have a clear preference, tell us what you want us to do, and we will follow your instructions.

In these cases, you have both the right and choice to tell us to: - Share information with your family, close friends, or others involved in your care - Share information in a disaster relief situation

We never share your information for: - Marketing purposes - Sale of your information - Most sharing of psychotherapy notes

unless you give us written permission.

OUR USES AND DISCLOSURES

For Treatment, Payment, and Health Care Operations

We may use and disclose your health information to treat you, bill for services, and run our organization.

Other Uses and Disclosures Required or Permitted by Law

We may also share your information to: - Help with public health and safety issues - Do research - Comply with the law - Respond to organ and tissue donation requests - Work with a medical examiner or funeral director - Address workers' compensation, law enforcement, and other government requests - Respond to lawsuits and legal actions

SPECIAL PROTECTIONS FOR SUBSTANCE USE DISORDER (SUD) RECORDS

Applicability Statement

Our practice does not operate as a federally assisted substance use disorder treatment program; however, if we receive records protected under **42 CFR Part 2**, those records will be handled in accordance with federal law.

Certain health information related to substance use disorder (SUD) diagnosis, treatment, or referral may be protected by **42 CFR Part 2**, which provides additional federal confidentiality protections.

- Part 2–protected information may be used or disclosed only as permitted by Part 2 and applicable HIPAA regulations.
 - In many cases, your **written consent** is required before disclosure, even for treatment, payment, or health care operations, unless a legal exception applies.
 - Part 2–protected information **may not be used or disclosed in civil, criminal, administrative, or legislative proceedings against you** without your written consent or a qualifying court order.
 - You may revoke your consent for Part 2 disclosures at any time, subject to legal limitations.
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OUR RESPONSIBILITIES

We are required by law to: - Maintain the privacy and security of your protected health information - Notify you promptly if a breach occurs that may have compromised the privacy or security of your information - Follow the duties and privacy practices described in this notice - Give you a copy of this notice

We will not use or share your information other than as described here unless you tell us we can in writing. You may change your mind at any time.

CHANGES TO THIS NOTICE

We may change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, in our office, and on our website.

CONTACT INFORMATION & COMPLAINTS

If you have questions about this Notice of Privacy Practices, wish to exercise your rights, or believe your privacy rights have been violated, please contact:

Privacy Officer: Andres Martinez, DDS

Practice: Houston TMJ Facial Pain and Sleep PLLC

Phone: (346) 487-8216

Email: contact@houstontmjdoctor.com

You may also file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights (OCR), by submitting a complaint online, by mail, or by telephone. We will not retaliate against you for filing a complaint.

LEGAL NOTICE

This Notice of Privacy Practices applies to Houston TMJ Facial Pain and Sleep PLLC and any workforce members who create, receive, maintain, or transmit protected health information on its behalf.