

# Protecting your smile — and your privacy

Keeping your personal information secure is vitally important to Dental Health Services. We value our relationship with you and continually strive to earn and maintain your trust. Enclosed is your *Confidentiality of Information and Privacy Notice*. Although this information may not have changed in years, we feel that it's important enough to send to you again.

We respect the confidentiality of your Protected Health Information (PHI) and will never sell or disclose it to nonaffiliated third parties. Our strict policies mandate that our employee-owners only access your information for the purpose of providing your dental benefits, and every staff member has been thoroughly trained in the procedures designed to protect

your privacy. If you ever have any questions or concerns about your privacy and Dental Health Services, please do not hesitate to contact your Member Service Specialist by phone at 800.63.SMILE or online through [www.smartsmile.com](http://www.smartsmile.com)!

## How can we help you today?

Your Member Service Specialist is always close at hand, ready to answer your questions and help you get the most out of your dental plan. Let us get you the answers and information you need.

- **By phone** - 800.63.SMILE
- **By fax** - 562.424.0150
- **By mail** - 3833 Atlantic Avenue, Long Beach, CA 90807
- **Online** - [www.smartsmile.com](http://www.smartsmile.com)

## Your Overall Health and Wellness!

### **REGULAR Health Examinations**

Please work with your dentist to schedule regular examinations to maintain your preventative care. Oral cavities, tooth loss, gum disease, and even oral cancers are just a few of the risk factors that may be prevented if you go to your dentist for regular health appointments.

The state of your mouth can often provide information about your overall health. Dentists can be instrumental in helping to diagnose many conditions and diseases that have oral effects. According to the Academy of General Dentistry, “more than 90 percent of all

systemic diseases produce oral signs and symptoms.” Your dentist can make sure you receive specialized oral and dental care if you have an existing chronic condition that requires it.

In addition to the care provided to you by our Quality Assured dentists, Dental Health Services offers each of our members’ educational tools to keep you updated on the ways oral care affects your overall health. Let Dental Health Services help YOU understand the significance of oral health—and its *mouth-body* connection...

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# Your Guide to Visiting the Dentist

## Selecting or Changing Your Dentist

Dental Health Services' members may go to any one of the Quality Assured dentists included in our network in California. Covered services are only provided by dentists/providers who are contracted by Dental Health Services. To select or change your dentist, follow these simple steps:

1. Go to [www.dentalhealthservices.com](http://www.dentalhealthservices.com)
2. Select *California* and click on the *Members* category
4. Click on *Select/Change Provider*
5. Select *Provider Search* and click on the *View all Providers* tab
6. Once you have located your desired provider, click on *Select/Change Provider* again to fill out your contact information, along with your selected dentist's Provider Number

Changes made to your dental office selection after the 10<sup>th</sup> of the month will be effective the 1<sup>st</sup> of the following month. If a covered family member wishes to receive care from one of our contracted dentists different than yours, please call your Member Service Specialist about our split-facility option.

We're confident about the care you'll receive. Before we contract with our dentists, we visit their offices to make sure your needs will be met. Dental Health Services' Professional Services Representatives regularly meet and work with our dentists to maintain excellence in dental care. If you need further guidance, contact your Member Service Specialist at 800.63.SMILE. We will be happy to assist you in finding the right dental office for you and your family!



## Scheduling an Appointment

You may make an appointment with your selected dentist as soon as you receive confirmation of your eligibility. In order to coordinate a time most convenient to your schedule, call your dental office directly to schedule appointments. Routine appointments will be scheduled within three weeks or less. Your plan covers care provided only by your selected dentist, except in the case of an out-of-area emergency.



## After-hours Emergency Care

### *Emergency Care: In-Area*

Palliative (pain relief) care for emergency dental conditions (see *Emergency Dental Conditions* under *Definitions*) such as acute pain, bleeding, or swelling is a benefit according to your *Schedule of Covered Services and Copayments*.

If you have a dental emergency and need to seek immediate care, first call your Dental Health Services' dentist. Participating dental offices maintain 24-hour emergency communication accessibility and are expected to see you within 24 hours of contacting the dental office or within such lesser time as may be medically indicated. If your dentist is not available, call your Dental Health Services' Member Service Specialist. If both the dental office and Dental Health Services cannot be reached, you are covered for emergency care at another Dental Health Services' dentist or from any licensed dentist. You will be reimbursed for the cost of emergency palliative treatment less any copayments that apply. Contact your assigned dentist for follow-up care as soon as possible. If you have a medical emergency, you should get care immediately by calling 9-1-1 or going to the nearest hospital emergency room.

### *Emergency Care: Out-of-Area*

Out-of-area emergency care is emergency palliative dental treatment required by an enrollee when more than 50 miles from any Dental Health Services dental center. Your benefit includes up to \$50 per enrollee per incident, after copayments are deducted. You must submit an itemized receipt from the dental office that provided the emergency service with a brief explanation, and your subscriber ID number, to Dental Health Services within 180 days. After 180 days, Dental Health Services reserves the right to refuse payment.

# Your Privacy Policy Notice

**THIS NOTICE DESCRIBES HOW YOUR MEDICAL AND DENTAL INFORMATION MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY. THIS NOTICE IS EFFECTIVE AUGUST 1, 2008.**

Dental Health Services is devoted to protecting your privacy and the confidentiality of your dental, medical, and personal health information that we may obtain or to which we have access. We do not sell our client information. Your personal information will not be disclosed to nonaffiliated third parties, unless permitted or required by law, or authorized in writing by you.

Throughout this Notice, unless otherwise stated, your medical and dental health information refers to only health information created or received by Dental Health Services and identified in this Notice as Protected Health Information (PHI). Please note that your dentist maintains your dental records, including payments and charges. Dental Health Services will have a record of this portion of your PHI only in special or exceptional circumstances.

Dental Health Services' privacy policies describe who has access to your PHI within the organization, how it will be used, when your PHI may be disclosed, safeguards to protect the privacy of your PHI and the training we provide our employees regarding maintaining and protecting your privacy.

## Under what circumstances must Dental Health Services share my PHI?

Dental Health Services is required to disclose your PHI to you, and to the U.S. Department of Health and Human Services (HHS) when it is conducting an investigation of compliance with legal requirements. Dental Health Services is also required to disclose your PHI, subject to certain requirements and limitations, if the disclosure is compelled by (any of the following):

- a court order;
- a board, commission or administrative agency pursuant to its lawful authority;
- a party to a proceeding pursuant to a subpoena, subpoena duces tecum, or other authorized discovery in a proceeding before a court or an administrative agency;
- an arbitrator or panel of arbitrators in a lawfully-requested arbitration;
- a search warrant;
- a coroner in the course of an investigation; or
- by other law.

## When may Dental Health Services disclose my PHI without my authorization?

Dental Health Services is permitted by law to use and disclose your PHI, without your authorization, for purposes of payment and health care administration.

- Payment purposes include activities to collect premiums and to determine or maintain coverage. These include using PHI in billing and collecting premiums, and related data processing including how your dentist obtains pre-authorization for certain dental services. For example, Dental Health Services periodically conducts quality assurance inspections of your dentist's office and during such visits may review your dental records as part of this audit.

- Health Care Administration means basic activities essential to Dental Health Services' function as a Limited Health Care Service Contractor, and includes reviewing the qualifications and competence of your dentist; evaluating the quality of his/her services; providing subscriber services and information including answering enrollee inquiries but without disclosing PHI. Dental Health Services may, for example, review your dentist's records to determine if the copayments being charged by the office comply with the contract under which you receive dental coverage.
- In addition, Dental Health Services is permitted to use and disclose your PHI, without your authorization, in a variety of other situations, each subject to limitations imposed by law. These situations include, but are not limited to, the following uses and disclosures:
  - o public health activities;
  - o concerning victims of abuse, neglect or domestic violence;
  - o health oversight agency;
  - o judicial and administrative proceedings including the defense by Dental Health Services of a legal action or proceeding brought by you;
  - o law enforcement purposes, subject to subpoena or law;
  - o Workers' Compensation purposes;
  - o parents or guardians of a minor; and
  - o persons or entities who perform services on behalf of Dental Health Services and from whom Dental Health Services has received contractual assurances to protect the privacy of your PHI.

## Is Dental Health Services ever required to get my permission before sharing my PHI?

Uses and disclosures of PHI other than those required or permitted by law will be made by Dental Health Services only with your written authorization. You may revoke any authorization given to Dental Health Services at any time by written notice of revocation to Dental Health Services, except to the extent that Dental Health Services has relied on the authorization before receiving your written revocation. Uses and disclosures beyond those required or permitted by law, or authorized by you, are prohibited.

## Does my employer have the right to access my PHI?

If you are an enrollee under a plan sponsored by your employer, Dental Health Services will not disclose PHI to your employer except under the following conditions:

- you sign an authorization for release of your medical/dental information, or
- health care services were provided with specific prior written request and expense of the employer, and are relevant in a grievance, arbitration or lawsuit, or describe limitations entitling you to leave from work or limit work performance.

Any such disclosure is subject to Dental Health Services' "minimum necessary" disclosures policy.

## What is Dental Health Services' "Minimum Necessary" Policy?

Dental Health Services uses reasonable efforts to limit the use and disclosure of your PHI to the minimum necessary to accomplish the purpose of the use or disclosure. This restriction includes requests for PHI from another entity, and to requests made by Dental Health Services to other entities. This restriction does not apply to requests by:

# Your Privacy Policy Notice (continued)

- your dentist for treatment purposes;
- you; or
- disclosures covered by an authorization you provided to another entity.

## What are my rights regarding the privacy of my PHI?

Your rights respecting your PHI, and how you may exercise these rights are summarized here.

- You may request Dental Health Services to restrict uses and disclosures of your PHI in the performance of its payment or health care operations. However, a written request is required. Your health is the top priority and Dental Health Services is not required to agree to your requested restriction. If Dental Health Services agrees to your requested restriction, the restriction will not apply in situations involving emergency treatment by a health care provider.
- Dental Health Services will comply with your reasonable requests that you wish to receive communications of your PHI by alternative means or at alternative locations. Such requests must be made to Dental Health Services in writing.
- You have a right, subject to certain limitations, to inspect and copy your PHI. Your request must be made in writing. Dental Health Services will act on such request within 30 days of receipt of the request.
- You have the right to amend your PHI. The request to amend must be made in writing, and must contain the reason you wish to amend your PHI. Dental Health Services has the right to deny such requests under certain conditions provided by law. Dental Health Services will respond to your request within 60 days of receipt of the request and, in certain circumstances may extend this period for up to an additional 30 days.
- You have the right to receive an accounting of disclosures of your PHI made by Dental Health Services for up to 6 years preceding such request subject to certain exceptions provided by law. These exceptions include, but are not limited to:
  - o disclosures made for payment or health care operations
  - o disclosures occurring prior to February 26, 2003

Your request must be made in writing. Dental Health Services will provide the accounting within 60 days of your request but may extend the period for up to an additional 30 days. The first accounting requested during any 12-month period will be made without charge. There is a \$25 charge for each additional accounting requested during such 12-month period. You may withdraw or modify any additional requests within 30 days of the initial request in order to avoid or reduce the fee.

- You have the right to receive a copy of this Notice, and any amended Notice, upon written or telephone request made to Dental Health Services.
- All written requests for the purposes described in this section, and all other written communications to Dental Health Services desired or required by this Notice, must be delivered to Dental Health Services, 3833 Atlantic Avenue, Long Beach, CA 90807 by any of the following means:

- o personal delivery;
- o email delivery to [customercare@dentalhealthservices.com](mailto:customercare@dentalhealthservices.com);
- o first class or certified U.S. Mail; or
- o overnight or courier delivery, charges prepaid

## What duties does Dental Health Services agree to perform?

- Dental Health Services will maintain the privacy of your PHI and provide you with notice of its legal duties and privacy practices with respect to PHI.
- Dental Health Services will abide by the terms of this Notice and any revised Notice, during the period that it is in effect.
- Dental Health Services reserves the right to change the terms of this Notice or any revised notice. Any new terms shall be effective for all PHI that it maintains including PHI created or received by Dental Health Services prior to the effective date of the new terms. Each time Dental Health Services makes a revised Notice, it shall 1) post it on its website, [www.smartsmile.com](http://www.smartsmile.com) and 2) distribute a written copy personally by First Class U.S. Mail to each of its subscribers who are enrolled with Dental Health Services during the period that such revised Notice remains effective.

## What if I am dissatisfied with Dental Health Services' compliance with HIPAA (Health Insurance Portability and Accountability Act) privacy regulations?

You have the right to express your dissatisfaction or objection to Dental Health Services and to the Secretary of HHS if you believe your privacy rights have been violated. Grievances to Dental Health Services must be made in writing to Dental Health Services, 3833 Atlantic Avenue, Long Beach, CA 90807 Attn: Privacy Officer. Your written dissatisfaction must describe the acts or omissions you believe to be in violation of the provisions of this Notice or applicable laws. Your written objection to HHS or Dental Health Services must be filed within 180 days of when you knew or should have known of the act or omission. You will not be penalized or retaliated against for communicating your dissatisfaction. We are eager to assist you.

## Who should I contact if I have any questions regarding my privacy rights with Dental Health Services?

You may obtain further information regarding your PHI privacy rights by contacting your Dental Health Services' Member Service Specialist at 800.637.6453 (800.63.SMILE) during regular office hours or through [www.smartsmile.com](http://www.smartsmile.com).

## Give someone you care about a great reason to smile today!

We've been providing excellent dental coverage for individuals, families, and employers for more than 30 years. If you know anyone that could use a great dental plan, **have them call us at 800.63.SMILE or visit us online at [www.smartsmile.com](http://www.smartsmile.com) today!**

## Optional Treatment

If you choose a more expensive elective treatment in lieu of a covered benefit, the elective treatment is considered optional. You are responsible for the cost difference between the covered and optional treatment on a fee-for-service basis. If you have any questions about optional treatment or services you are asked to pay additional for, please contact your Member Service Specialist BEFORE you begin services or sign any agreements.

*To avoid any confusion on treatment or payment options, please follow these guidelines:*

### *Refer to your Schedule of Covered Services and Copayments:*

If there is a question of whether or not the treatment recommended by your dentist is covered by your plan, this source will provide you with an exhaustive list of all your covered benefits.

### *Call your Member Service Specialist:*

If you still have any questions regarding your treatment, call 800.63.SMILE and one of our Member Service Specialists (all of whom have dental office experience!) will be happy to assist you.

### *Know that you have options:*

Your dentist may recommend extra treatment options (not included in your covered services). These additional services are always *optional*. You can decline these treatments and select only those covered by your plan if you choose.

### *Ask your dentist for a treatment plan prior to receiving treatments:*

It is your right to know about your oral care! Don't be afraid to ask your dentist for more information.

### *DO NOT sign anything you do not fully understand or agree to:*

Our Member Service Specialists are always available to help you understand the treatment options being offered to you by your dentist. If you have any concerns, call us *first*. We will answer any questions you have about your treatment options.

Treatment is approved and rendered by the dental office according to plan benefits. If treatment authorization is denied, you may contact Dental Health Services (see *Grievance Procedure*).

**ToothTips<sup>sm</sup>** are designed to educate you and your family on various dental procedures and oral care topics. To download the ToothTips<sup>sm</sup> from our website, visit [www.dentalhealthservices.com](http://www.dentalhealthservices.com) and click on *ToothTips* under the *Members* category to select the topics you want to view and/or print. To request any of our other educational resources, contact your Member Service Specialist at 800.63.SMILE. We will mail your requested materials right away!



## Eligibility

As the subscriber, you may enroll yourself, your spouse or your domestic partner, and/or unmarried dependent children who are under 19 years of age. Children over 19 years of age and older are eligible if:

The child is unmarried and a fulltime student solely dependent upon subscriber for support, and is under 23 years of age; or the child is and continues to be both (1) incapable of self sustaining employment by reason of a mental disability, including, but not limited to mental illness or physical disability or a combination of those disabilities and (2) chiefly dependent upon the subscriber or member for support and maintenance.

*Dental Health Services may require proof of the above, which the subscriber must furnish within 31 days of such a request. Failure to do so may result in termination of your child's eligibility.*



## Grievance Procedure

Dental Health Services recommends that you first discuss any grievance regarding treatment or treatment costs with your selected dentist. For assistance, you may contact your Member Service Specialist by calling 800.63.SMILE, faxing or submitting your grievance electronically through [www.dentalhealthservices.com](http://www.dentalhealthservices.com). You may also mail a letter to the following address:

Member Services  
Dental Health Services  
3833 Atlantic Avenue  
Long Beach, CA 90807

Dental Health Services will resolve the grievance, including all levels of appeal, within 30 calendar days of receiving the grievance or notification. Grievances involving emergency care are addressed immediately and responded to in writing within three (3) days. Should you be unhappy with the decision, you may request a review by notifying Dental Health Services in writing. Voluntary mediation is available by submitting a request to Dental Health Services.

The following is the exact language and notice as required by the Department of Managed Health Care (DMHC). Please note that the term "Health Plan" refers to Dental Health Services.

The California Department of Managed Health Care is responsible for regulating health care service plans. If you have a grievance against your health plan, you should first telephone your health plan at **1.800.637.6453** and use your health plan's grievance process before contacting the department. Utilizing this grievance procedure does not prohibit any potential legal rights or remedies that may be available to you. If you need help with a grievance involving an emergency, a grievance that has not been satisfactorily resolved by your health plan, or a grievance that has remained unresolved for more than 30 days, you may call the department for assistance. You may also be eligible for an Independent Medical Review (IMR). If you are eligible an IMR, the IMR process will provide an impartial review of medical decisions made by a health plan related to the medical necessity of a proposed service or treatment, coverage decisions for treatments that are experimental or investigational in nature and payment disputes for emergency or urgent medical or urgent medical services. The department also has a toll-free telephone number (**1.888.HMO.2219**) and a TDD line (**1.877.688.9891**) for the hearing and speech impaired. The department's Internet Web site <http://www.hmohelp.ca.gov> has complaint forms, IMR application forms and instructions online.

## Dental 101

### Take a Bite Out of Tooth Decay

As hard as it may be for parents and grandparents to believe, a child's visit to the dentist is now an easy and even entertaining experience! The major reason for this turnabout is that tooth decay, formerly the most common of human diseases, is fast becoming a thing of the past. The cavity rate for youngsters ages 5-17 has decreased 67 percent over the past 35 years. The majority of today's children are cavity-free, which is a huge success story in modern preventive healthcare.

### Causes and Effects of Cavities

In American children, cavities found in between teeth "are rapidly approaching eradication," states the National Institute for Dental Research. Most decay is now found in baby teeth and in chewing surfaces of permanent back teeth (molars).

A common cause for cavities are natural defects in molars known as "pits" and "fissures." These defects can extend far into the enamel and cannot be cleaned by brushing or flossing. Bacteria, the foundation for cavities, easily multiply in these pits and fissures and produce decay.

The solution to these enamel problems is sealants. A painless procedure, sealants are applied to teeth by a licensed dentist in a process known as "bonding." The sealant covers the defect and prevents bacteria from entering, thereby protecting teeth from decay.

### Dietary Concerns

Tooth decay is a bacterial disease. Cavity-causing germs love to feed on all sugars and cooked starches. The longer carbohydrates are chewed and kept in contact with teeth, the greater the chance bacteria have to feed off them and produce decay-causing acids. Constantly "bathing" teeth in sugars and cooked starches is especially harmful. This problem is most acutely observed in small children who are bottle-fed fruit juice or milk between regular feedings. What commonly results is "bottle mouth syndrome," or multiple decayed baby teeth. To avoid this problem, bottle-fed children should be given only plain water as a beverage between meals.

### Child-Friendly Dental Offices

Many children's dental offices today look like mini theme parks, with space capsules, hot-air balloons, game arcades, and overhead television monitors playing classic children movies. These visual and auditory treats place youngsters at ease and help make for enjoyable visits.


### Parental Attitudes

Despite adults' past dental experience, the practice of pediatric dentistry today has changed. Moms and dads should speak to their children in positive terms about seeing the dentist. If the parent is positive, it is likely the child will be positive, too. This will lay the groundwork for a generation of patients who are less fearful of dentists and hopefully, a lifetime of positive dental health experiences.

*\*Please be aware that this information is provided to supplement the care provided by your physician. It is neither intended nor implied to be a substitute for professional medical advice.*

# IT'S YOUR MOUTH!

Get the most out of your dental coverage and care




**Make a convenient appointment**



Let the office know you are a member




**Know your coverage**



**Take your Evidence of Coverage brochure**



**Establish a relationship with your dentist**



**Ask questions**




**Read and understand anything you sign**

**We can help—call us!**



**800.637.6453**  
**Ask for help**



**Complete your treatment plan**



*A Great Reason to Smile<sup>SM</sup>*

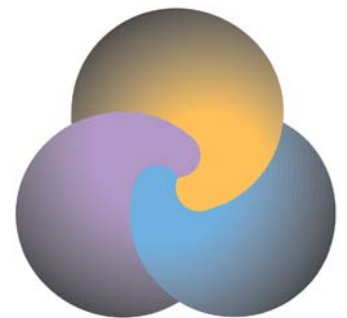
**IMPORTANT DENTAL PLAN  
INFORMATION ENCLOSED**

**Dental Health Services**  
3833 Atlantic Avenue  
Long Beach, CA 90807

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US POSTAGE PAID  
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## Did you know?

Dental Health Services has been providing high quality benefits to satisfied members in California for more than 34 years.



D e n t a l  
H e a l t h  
S e r v i c e s