

ACCESS REQUEST

Purpose: This form is used for an individual's request to inspect and obtain a copy of his or her protected health information in a designated record set that we maintain or that our business associates maintain for us.



SECTION A: Individual requesting access.

Name: _____

Address: _____

Telephone: _____ E-mail: _____

Identification Number: _____ Social Security Number: _____

TO THE INDIVIDUAL: Please read the following and complete the information requested.

You have the right to inspect and obtain a copy of your protected health information in our designated record sets. You are not entitled to inspect or obtain a copy of any psychotherapy notes we may have, any information we may have compiled in anticipation of or for use in a civil, criminal or administrative proceeding, and certain other records. To exercise your right of access, please complete Section B.

SECTION B: Protected health information access requested.

Please specify the records to which you wish to have access: _____

Do you wish to: Inspect these records? Obtain a copy of these records?

We will charge you \$0. _____ per page to copy these records.

Would you like us to make the records available to you: On paper? Electronically?

Do you want us to: Prepare a summary or an explanation of these records?

We will charge you \$ _____ for the summary or explanation.

Do you want us to: Mail the copies?

We will charge you for the postage/shipping.

Please list the name and address of each person, including yourself or your personal representative, for whom you want us to make a copy. If you want us to provide access to or a copy of your records to any person other than you or your personal representative, you must provide us with a signed authorization. We can supply you with an authorization form.

INDIVIDUAL'S SIGNATURE.

Date: _____

If this request is by a personal representative on behalf of the individual, complete the following:

Personal Representative's Name: _____

Relationship to Individual: _____

YOU ARE ENTITLED TO A COPY OF THIS REQUEST