

CHIE Patient Participation Form

The Clinical Health Information Exchange (cHIE) is here to make your life simpler and safer. With this form, you are indicating your participation level in the statewide secure electronic system called the cHIE.

Fill out this form completely and return it to your healthcare professional or to the cHIE office at 1226 E 6600 S Salt Lake City, UT 84121.

PATIENT INFORMATION (PLEASE PRINT):

FIRST NAME:

MIDDLE NAME:

LAST NAME:

DATE OF BIRTH: MM-DD-YYYY

 - -

ADDRESS:

CITY:

STATE:

ZIP:

GENDER:

 MALE FEMALE

PARTICIPATION LEVELS: PLEASE CHOOSE ONLY ONE BOX BELOW.

- PARTICIPATE: I want my medical records to be accessible to participating healthcare professionals through the cHIE.
- NOT-PARTICIPATE: I do not want my medical records accessed by any healthcare professional through the cHIE for treatment purposes, even in an emergency. I understand that my "Not-Participate" decision does not alter any other legally valid use of personal health information.

By signing this form, I acknowledge that I have read and understand my participation levels as described herein. I also understand I can change my participation at any time by completing a new cHIE Patient Participation Form and returning it to a participating cHIE healthcare professional or to the cHIE office.

SIGNATURE OF PATIENT OR PATIENT'S LEGAL REPRESENTATIVE

DATE OF THIS PARTICIPATION DECISION

PRINT NAME OF LEGAL REPRESENTATIVE (IF APPLICABLE)

RELATIONSHIP OF LEGAL REPRESENTATIVE

By signing as the patient's legal representative I certify that: the Patient's Name is accurate and correct, that I am the Parent or Legal Guardian of the Patient, and that I have authority to sign this Participation Form on the Patient's behalf.

REQUIRED – PARTICIPATION FORM WITNESSED BY AUTHORIZED AGENT. To protect your privacy and verify your identity, your signature on this participation form must be witnessed by your healthcare professional, a notary public, or a cHIE representative.

Name of Organization: _____ Name of Witness: _____

As a witness to this Participation Form, I attest that the above signer is personally known to me or has established his/her identity with me by satisfactory photo ID, insurance card, or other evidence of identity customarily relied upon in healthcare.



Knowledge can save lives.

At some point, you or your loved ones will need medical care. While you might prefer to see the same doctor every time, sometimes you need to see other doctors such as when you are traveling, need a specialist or have an emergency. That's why Utah's healthcare community is teaming up with the cHIE (pronounced *chee*), Utah's Clinical Health Information Exchange. The cHIE allows you to securely share your medical information - such as medications, allergies, immunizations, lab test results, and x-ray reports-so all your healthcare professionals know your medical history and can make the best possible decisions to care for you and your loved ones.

The cHIE is a service provided by the Utah Health Information Network (UHIN). The cHIE provides a way for authorized healthcare professionals to securely access and share patient medical information. UHIN and the healthcare community are working to grow the cHIE. We are connecting healthcare professionals throughout the state to improve the quality of care and lower costs.

Your medical history in the cHIE today means better care tomorrow.

The federal medical privacy law, HIPAA, allows your healthcare professionals to have access to your medical information in order to treat you, to receive payment for treating you and to run their office. The cHIE is one secure way for your healthcare professionals to have access to this information.

Many insurers offer case or disease management programs to help with your care for a chronic condition, such as diabetes, or an episode of serious illness resulting in a hospital stay. The purpose of these programs is to help make sure that you get the care you need in a timely manner. Case/disease managers are generally healthcare professionals such as registered nurses. If you have a case/disease manager, s/he may use the cHIE to get information needed to coordinate your care.

From a medical perspective, it is vitally important that your healthcare professionals have access to all your medical information. Complete information helps your healthcare professionals know what to do to help you so they don't do something that may hurt you. The medical information in the cHIE collected from your participating cHIE healthcare professionals is based on what you choose to verbally share and whether your healthcare professional is contributing data to the cHIE. UHIN does not guarantee that your medical history in the cHIE is 100% accurate or complete.

Additionally, the cHIE may contain medical information related to sensitive health conditions such as alcohol or drug use problems, mental health conditions, HIV/AIDS, birth control, abortion, or sexually transmitted infections. Remember, only authorized healthcare professionals can access this information. If you do not participate in the cHIE, your medical information stored in the cHIE, if any, will not be purged. Instead it will be made inaccessible and unavailable even in an emergency.

Your medical information is protected.

Federal law protects your medical information. HIPAA, the Health Insurance Portability and Accountability Act of 1996, is the federal law that protects your medical information and limits who can look at and receive your medical information. HIPAA's protections are further strengthened by another federal law, the HITECH Act, which can impose severe financial fines on anyone who violates your medical-privacy rights. All data in the cHIE, whether in motion or at rest, is *encrypted*—unreadable without the right credentials—to federal standards and is accessible only as allowed by law. For more information about how your medical information is protected in the cHIE, visit <https://uhin.org/patients/>.

Only authorized healthcare professionals who have a relationship with you may access your medical information. All user activity in the cHIE is recorded. The information recorded includes the identity of those who accessed your record, the date of access, the types of information accessed, and the reason your record was accessed. User activity is audited to make sure that it is appropriate. Using secure electronic records makes it easier than it is with paper records to enforce laws and regulations governing access to personal health information. You can request an audit of access to your cHIE medical records from your participating healthcare professional at any time.

Questions about improper access.

If you ever suspect that someone has improperly accessed your medical information through the cHIE, please contact one of the following: your healthcare professional, the Utah Health Information Network at 877-693-3071, the Utah Office of the Attorney General at uag@utah.gov or file a complaint with the Federal Office for Civil Rights at <http://www.hhs.gov/ocr/privacy/hipaa/complaints/index.html>.

Changing participation.

If you do not want your information to be available through the cHIE, or if you have not been participating with the cHIE but now want your information to be included, you may change your cHIE participation status. Simply complete a new cHIE Patient Participation form, sign it and have it witnessed by your healthcare professional, a notary public, or a cHIE staff member, and give it to your healthcare professional or to the cHIE at the address on the first page of this form. Please note that changes made to your participation will be processed in a reasonable amount of time, and may not be immediate. Your current participation status will remain in effect until your request can be updated.

For more information go to uhin.org/patients/, or call UHIN at 877-693-3071