



## PATIENT FACT SHEET ABOUT HEALTH INFORMATION EXCHANGES

Patient Name: \_\_\_\_\_

DOB: \_\_\_\_\_

### What is Health Information Exchange (HIE) and why is it important?

CenterWell participates in the exchange of electronic health information with other health care providers through HIEs. This technology allows patients' health information, including medical history, diagnosis, treatment, medications, and test results, to be available and viewed electronically by your doctor and medical team members. HIEs are designed to provide quick access to medical records to make treatment more effective and efficient.

### How will patients' health information be used and who can access it?

CenterWell participates in several HIEs. Patients' health information will be accessible to other health care providers that participate in the HIEs that are involved in the patient's care. Such providers will have access to patients' health information, and it can only be used for treatment, payment and health care operations.

### Is patients' electronically shared health information kept safe and private?

Protecting patient information is an integral part of how CenterWell conducts business. The Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy, Security and Breach Notification Rules are the main federal laws that protect your health information. States may also have laws that are more restrictive than federal law. CenterWell follows all state and federal privacy and security laws to protect and secure patient health information.

### What are patients' options regarding HIEs?

Patients have the right to decide whether providers can access their health information via an HIE. If patients do not want their health information shared through an HIE, they may complete the Patient HIE Opt-Out Request Form. This form is available at each CenterWell location. CenterWell will honor a patient's request to opt-out of HIEs, except in emergencies when necessary to properly treat the patient and when otherwise required by law. It is important to note that a patient's request to opt out of HIEs may result in healthcare providers not having access to needed information to provide appropriate care.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### Relationship to Patient:

*If signed by a person other than yourself, please check the relationship and provide proof of authority.*

Self

Legal Representative

Other (please specify) \_\_\_\_\_

\_\_\_\_\_  
\*\*Name of Interpreter/Translator

\_\_\_\_\_  
Telephone

*\*\*If a translator/interpreter was required.*

### OFFICE USE ONLY

\_\_\_\_\_  
Office Personnel Name (Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## PATIENT FACT SHEET ABOUT HEALTH INFORMATION EXCHANGES

Patient Name:

DOB:

### Important!

At CenterWell Senior Primary Care, it is important you are treated fairly.

CenterWell Senior Primary Care (CenterWell) does not discriminate or exclude people because of their race, color, national origin, age, disability, sex, sexual orientation, gender, gender identity, ancestry, marital status or religion. Discrimination is against the law. CenterWell complies with applicable Federal Civil Rights laws. If you believe that you have been discriminated against by CenterWell, there are ways to get help.

- You may file a complaint, also known as a grievance:  
Discrimination Grievances, P.O. Box 14618, Lexington, KY 40512-4618  
If you need help filing a grievance, call **1-877-320-2188** or if you use a **TTY**, call **711**.
- You can also file a civil rights complaint with the **U.S. Department of Health and Human Services**, Office for Civil Rights electronically through their Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or at **U.S. Department of Health and Human Services**, 200 Independence Avenue, SW, Room 509F, HHH Building, Washington, DC 20201, **1-800-368-1019, 800-537-7697 (TDD)**. Complaint forms are available at <https://www.hhs.gov/ocr/office/file/index.html>.
- **California residents:** You may also call California Department of Insurance toll-free hotline number: **1-800-927-HELP (4357)**, to file a grievance.

Auxiliary aids and services, free of charge, are available to you. **1-877-320-2188 (TTY: 711)**

CenterWell provides free auxiliary aids and services, such as qualified sign language interpreters, video remote interpretation, and written information in other formats to people with disabilities when such auxiliary aids and services are necessary to ensure an equal opportunity to participate.

Language assistance services, free of charge, are available to you. **1-877-320-2188 (TTY: 711)**

**Español (Spanish):** Llame al número arriba indicado para recibir servicios gratuitos de asistencia lingüística.

**繁體中文 (Chinese):** 撥打上面的電話號碼即可獲得免費語言援助服務。

**Tiếng Việt (Vietnamese):** Xin gọi số điện thoại trên đây để nhận được các dịch vụ hỗ trợ ngôn ngữ miễn phí.

**한국어(Korean):** 무료 언어 지원 서비스를 받으려면 위의 번호로 전화하십시오.

**Tagalog (Tagalog – Filipino):** Tawagan ang numero sa itaas upang makatanggap ng mga serbisyo ng tulong sa wika nang walang bayad.

**Русский (Russian):** Позвоните по номеру, указанному выше, чтобы получить бесплатные услуги перевода.

**Kreyòl Ayisyen (French Creole):** Rele nimewo ki pi wo la a, pou resevwa sèvis èd pou lang ki gratis.

**Français (French):** Appelez le numéro ci-dessus pour recevoir gratuitement des services d'aide linguistique.

**Polski (Polish):** Aby skorzystać z bezpłatnej pomocy językowej, proszę zadzwonić pod wyżej podany numer.

**Português (Portuguese):** Ligue para o número acima indicado para receber serviços linguísticos, grátis.

**Italiano (Italian):** Chiamare il numero sopra per ricevere servizi di assistenza linguistica gratuiti.

**Deutsch (German):** Wählen Sie die oben angegebene Nummer, um kostenlose sprachliche Hilfsdienstleistungen zu erhalten.

**日本語 (Japanese):** 無料の言語支援サービスをご要望の場合は、上記の番号までお電話ください。

**فارسی (Farsi)**

**Diné Bizaad** برای دریافت نسیه‌بالت زبانی بصورت رایگان با شماره فوق تماس بگیرید.

**ĔNavajo:** W0dah7 b44sh bee hani7 bee wolta7g77 bich9' h0d77nih 47 bee t'11 jiik'eh saad bee 1k1'1n7da'1wo'd66 nik1'adoowo[.

**العربية (Arabic)**

الرجاء الاتصال بالرقم المبين أعلاه للحصول على خدمات مجانية للمساعدة بلغتك

GCHJV5REN 0220