

Index to Auth-Communication

1. Cov Ntaub Ntawv Qhia Txog Tus Neeg Mob:

Lub Npe – Lub Xeem, Lub Npe, LUB NPE NRAB (Lub npe hluas nkauj los sis lub qub npe)			
Txoj Kev Chaw Nyob	Nroog	Xeev	Tus Ziv Khauj
Nab Npawb Cim Cov Ntaub Ntawv Kho Mob (yog tsis paub los tsis ua cas)		Hnub Yug	Nab Npawb Xov Tooj

2. Cov Ntaub Ntawv uas yuav Raug Nthuav Tawm: Tsuag yog siv rau kev sib txuas lus los ntawm kev hais lus nkaus xwb: tus neeg mob txoj kev saib xyuas tu mob - **tsis muaj cov ntaub ntawv kho mob**

3.

Kev Sib Txuas Lus Los Ntawm Kev Hais Lus Ntawm:

_____ **thiab:** Lub Npe: _____
 (lau lub npe ntawm qhov chaw kho mob los sis kev kho mob tshwj xeeb. Kev sau npe "ACHC" yuav npog txhua qhov chaw ACHC) (sau lub npe thiab lub xeem ntawm tus (cov) neeg uas yog koj tus kws kho mob / cov ntaub ntawv uas tej zaum yuav raug nthuav tawm, xws li tus neeg ua hauj lwm muab kev pab rau fab sim nee hauv lub zej zos)

THIAB / LOS SIS

Faj LUS KAW UA SUAB tseg rau tus neeg mob ntawm tus (cov) xov tooj hauv qab no: _____
 _____ (lus kaw ua suab xam nroog rau txhua cov lus qhia, tshwj tsis yog raug txwv raws li hauv qab nod):
 Txwv tsis pub xa lus kaw ua suab tuaj tsuas yog xa tau raws li cov lus qhia mee tseeb nkaus xwb: _____
 (saib sab nraum qab ntawm daim ntawv ceeb toom txog cov lus kaw ua suab)

THIAB / LOS SIS

Faj LUS KAW UA SUAB TSEG RAU IB TUS NEEG uas teb cov xov tooj ntawm tus nab npawb xov tooj uas muab rau hauv lub npov tam sim ntawd raws li saum toj no. Thov qhia mee tseeb:
 Leej twg los tau Tus (cov) neeg tau txais kev tso cai lub (cov) npe: _____

4. Lub Hom Phiaj ntawm Kev Sib Txuas Lus: Kev saib xyuas kho mob txuas ntxiv mus, tshwj tias tau qhia mee tseeb: _____

5. Daim foos tso cai no yuav tag sij hawm nyob rau hauv ib lub xyoos suav tab txij li hnub tau muaj kev kos npe mus tshwj tsis yog tau hais qhia mee tseeb mus lwm yam rau hauv qab nod:
 Sau qhia hnub tag sij hawm mee tseeb los sis sau qhia txog kev tsis muaj tag sij hawm: _____

**** THOV SAIB NYOB RAU NPLOOJ TXUAS NTXIV TXHAWM RAU KOM PAUB TXOG COV LUS QHIA NTAU NTXIV****

Raws li cov xwm txheej tau teev tseg saum toj nod thiab nyob rau nplooj ntawv txuas ntxiv ntawm daim foos no, kuv tso cai rau kev siv thiab/los sis kev nthuav tawm txog kuv cov ntaub ntawv kho mob tau. Daim foos tso cai no xam nroog rau kev nthuav tawm ntawm cov ntaub ntawv hais txog kev tsis mee pem los ntawm kev siv tshuaj yeeb dej caw, kev muab lus sab laj txog rau fab kev mob puas hlwb thiab kev mob puas siab puas ntsws, kev xiam oob khab rau fab kev loj hlob, kev kuaj xyuas roj ntsha caj ces, kab mob AIDS los sis lwm yam mob uas cuam tshuam txog rau kab mob AIDS, kev sib kis kab mob los ntawm kev sib deev, thiab / los sis qhov kawg uas paub los ntawm kev kuaj xyuas kab mob HIV, tshwj tsis yog kuv txwv qhov kev nthuav tawm uas yog muab cais tawm cais rau hauv qab no: _____

Tus Neeg Mob/Tus Neeg Sawv Cev Kos Npe Rau: _____ **Hnub tim:** ____/____/____
 Yog tias kos npe los ntawm lwm tus neeg mob uas tsis yog tus neeg mob, thov sau lub npe thiab sau qhia mee tseeb txog kev sib txheeb zeb thiab txoj cai los kos npe li ntawd. (Saib nplooj txuas ntxiv txhawm rau ua kev paub ntau ntxiv)

Sau Lub Npe: _____ **Kev Sib Txheeb Ze:** _____
 Tus neeg mob Me nyuam yaus Tsis muaj peem xwm/Ua rau tsis muaj peev xwm Tus Txij Nkawm/Tus Txij Nkawm Hauv Tsev Neeg uas Tau Tag Lub Neej Txoj Sia Lawm
 Txoj Cai Raug Tus Neeg Saib Xyuas Raug Cai Niam Txiv ntawm Tus Me Nyuam Yaus Tus Neeg Txheeb Ze Txuas Ntxiv
 Cai: Tus Neeg Sawv Cev Rau Kev Saib Xyuas Kho Mob Rau Fab Kev Noj Qab Haus Huv
 Tus Neeg Sawv Cev Rau Ntiag Tug Lwm yam: _____

COV LUS QHIA NTXIV TXOG DAIM FOOS TSO CAI RAU KEV SIB TXUAS LUS LOS NTAWM KEV HAIS LUS THIAB/LOS SIS KEV FAJ LUS KAW UA SUAB TSEG

Cov Chaw Muab Kev Pab Kom Nkag Cuag Tau Rau Kev Noj Qab Haus Huv Hauv Zej Zos (Access Community Health Centers) saib xyuas txog cov kws kho mob uas hwm txog tus neeg mob txoj cai thiab cov ntaub ntawv kho mob uas tau txais kev tiv thaiv zais tsis pub kom lwm tus paub txog raws li tau qhia tseg hauv tsoom fww thiab lub xeev txoj kev cai lij choj. Thov nyeem cov txheeb txheem qhia hauv qab no ua ntej yuav kos npe rau daim foos tso cai no.

Kev Nthuav Tawm Txog Cov Ntaub Ntawv: Tej zaum cov ntaub ntawv uas raug nthuav tawm kuj yuav muab tau los ntawm cov ntaub ntawv kho mob ntawm Cov Chaw Muab Kev Pab Kom Nkag Cuag Tau Rau Kev Noj Qab Haus Huv Hauv Zej Zos (Access Community Health Centers). Nws kuj yuav muab tau los ntawm ntau cov foos nplooj ntawv los sis cov foos es lev taus niv (electronic) (raws li muaj). Nws kuj yuav muaj xam nrog rau cov ntsiab lus uas tau los ntawm sab nrauv uas tau muab tso rau hauv cov kev teeb txheeb thiab cov ntaub ntawv. Cov ntawv luam uas raug nthuav tawm los ntawm Kev Tswj Xyuas Cov Ntaub Ntawv Qhia Txog Fab Kev Noj Qab Haus Huv (Health Information Management) tsuas yog muaj xam nrog rau cov ntaub ntawv kho mob nkaus xwb.

Kev Xa Cov Ntaub Ntawv Tso Cai mus rau Cov Chaw Muab Kev Pab Kom Nkag Cuag Tau Rau Kev Noj Qab Haus Huv Hauv Zej Zos (Access Community Health Centers): Tuaj yeem xa Cov Ntaub Ntawv Tso Cai mus rau Cov Chaw Muab Kev Pab Kom Nkag Cuag Tau Rau Kev Noj Qab Haus Huv Hauv Zej Zos (Access Community Health Centers) mus rau Cov Chaw Muab Kev Pab Kom Nkag Cuag Tau Rau Kev Noj Qab Haus Huv Hauv Zej Zos (Access Community Health Centers), Tshwj xeeb: Kev Nthuav Tawm Txog Cov Ntaub Ntawv/UW Lub Chaw Saib Xyuas Kev Noj Qab Haus Huv, 8501 Excelsior Drive, Madison, WI 53717 los sis raug xa rov qab mus rau Access ib lub chaw kuaj mob.

Tsoom Fww Cov Cai Kev Ntiag Tug Rau Fab HIPAA Tsoom fww cov cai no yuav qhia meej tseeb tias thaum twg koj cov ntaub ntawv kho mob uas tau txais kev tiv thaiv yuav raug siv los sis nthuav tawm yam tsis tas yuav tos kev tso cai los ntawm koj tus kheej li cas. Thov saib peb Tsaib Ntawv Ceeb Toom txog Kev Tiv Thaiv Kev Ntiag Tug txhawm rau kom paub txog cov lus qhia ntau ntiv. Koj tuaj yeem nrhiv ib daim ntawv luam ntawm Tsaib Ntawv Ceeb Toom txog Kev Tiv Thaiv Kev Ntiag Tug nyob rau hauv lub vev xaij ntawm <https://accesscommunityhealthcenters.org/>.

Tsoom Fww Tshooj Cai Hais Txog Kev Ntiag Tug Rau Khoos Kas Kev Kho Mob Rau Fab Kev Tsis Meej Pem Los Ntawm Kev Siv Tshuaj Yeeb Dej Caw (42 CFR Tshooj 2): Tsoom fww cov cai hais txog cov lus zais tsis pub leej twg paub (42 CFR Tshooj 2) uas siv rau kev kho mob rau fab kev tsis meej pem los ntawm kev siv tshuaj, yeeb dej caw thiab/los sis cov ntaub ntawv xa kho mob uas tau txais kev tswj xyuas los ntawm Tshooj 2 qhov khoos kas txwv tsis pub muaj lwm yam kev nthuav tawm dab tsi ntiv txog ntawm cov ntaub ntawv ntawd yam tsis tau txais kev pom zoo sau ua ntaub ntawv los ntawm tus tswv uas nws cov ntaub ntawv yuav raug nthuav tawm ntawd los sis tshwj tsis yog tau muaj kev tso cai nthuav tawm tau mus lwm yam los ntawm 42 CFR Tshooj 2. Txawm li cas los xij, txhua qhov kev nthuav tawm cov ntaub ntawv kho mob yuav yog ib qho phom sij ua rau muaj kev rov nthuav tawm yam tsis raug cai thiab yuav ua rau cov ntaub ntawv kho mob ntawd tsis tau txais kev tiv thaiv los ntawm tsoom fww cov cai kev ntiag ntug.

Wisconsin Txoj Kev Cai Lij Choj Tiv Thaiv Tsis Pub Lwm Tus Paub Txog Cov Ntaub Ntawv Kho Mob Ntawm Tus Neeg Mob Thiab Qhia Meej Tseeb Tias Thaum Twg Cov Ntaub Ntawv Yuav Raug Muab Nthuav Tawm Tau Yam Tsis Tau Txais Kev Tso Cai Los Ntawm Koj Los Tau.

Kev Taw Qhia Meej Tseeb Txog Kev Nthuav Tawm Txog Cov Ntaub Ntawv Kev Kho Mob Rau Fab Kev Tsis Meej Pem Vim Los Ntawm Kev Siv Tshuaj Yeeb Dej Caw: Kuv nkag siab tias kuv tau taw qhia meej tseeb yam dav fo rau kev nthuav tawm txog cov ntaub ntawv kho mob rau fab kev tsis meej pem vim los ntawm kev siv tshuaj yeeb dej caw thiab/los sis cov ntaub ntawv xa kho mob rau cov neeg los sis cov koom haum raug raws cai uas kuv muaj kev sib raug zoo rau fab kev kho mob. Kuv tuaj yeem thov tau ib daim ntawv teev txog cov neeg los sis cov koom haum uas kuv cov ntaub ntawv hais txog kev tsis meej pem vim los ntawm kev siv tshuaj yeeb dej caw raug nthuav tawm rau lawv ntawd uas yog tiv tauj rau Tus Thawj Saib Xyuas txog Kev Phom Sij thiab Kev Nyab Xeeb, 2901 West Beltline Hwy, (608) 443-5545.

Kev Sib Txuas Lus Los Ntawm Kev Hais Lus Nkaus Xwb: Daim foos tso cai no tso cai cia rau kev sib txuas lus los ntawm kev hais lus (tim ntsej tim muag thiab hauv xov toj tib si) ntawm Lub Chaw Muab Kev Pab Kom Nkag Cuag Tau Rau Kev Noj Qab Haus Huv Hauv Zej Zos (Access Community Health Center) thiab tus (cov) neeg raug xaiv rau daim foos no. Nws tsis tso cai rau muab cov ntaub ntawv luam ntawm cov ntaub ntawv kho mob koj mus nthuav tawm.

Cov Lus Kaw Ua Suab: Lub Chaw Muab Kev Pab Kom Nkag Cuag Tau Rau Kev Noj Qab Haus Huv Hauv Zej Zos (Access Community Health Center) cov kws kho mob thiab lawv cov neeg ua hauj lwm paub zoo txog kev tsis pub lwm tus neeg paub txog cov ntaub ntawv kho mob ntawd vim nws yog ib feem tseem ceeb ntawm kev sib raug zoo ntawm koj nrog rau lawv. Txhawm rau tiv thaiv koj tus kheej cov ntaub ntawv kho mob ntiag tug tsis pub leej twg paub, lawv yuav tsis niaj hnub faj lus kaw ua suab rau ntawm koj lub xov toj qhov chaw kaw lus ua suab (xa lus kaw ua suab los sis kev teb koj lub xov toj los sis tham nrog koj tus txij nkawm, cov neeg hauv tsev neeg los sis lwm tus neeg) tshwj tsis yog tias koj tau tso cai rau kom ua li ntawd. Daim foos no tsuas tso cai no qhia tau koj cov ntaub ntawv kho mob mus raws li qhov koj tau hais qhia meej tseeb nkaus xwb.

Tsis Muaj Kev Yuam Kom Koj Yuav Tsum Tau Kos Npe Rau: Koj tsis tau raug yuam kom yuav tsum tau kos npe rau hauv daim foos no, thiab koj muaj cai zam tsis kam kos npe rau tau tib si. Tsuas yog tias tau tso cai raws li txoj kev cai lij choj siv tau xwb, Cov Chaw Muab Kev Pab Kom Nkag Cuag Tau Rau Kev Noj Qab Haus Huv Hauv Zej Zos (Access Community Health Centers) yuav tsis lam cia li tsis kam muab kev kho mob los sis lwm cov kev pab cuam rau kev saib xyuas kho kom muaj kev noj qab haus huv yog hais tias hais tias koj zam tsis kam kos npe rau daim foos no.

Kev thim lus: Koj muaj txoj cai thim qhov kev tso cai no, uas sau ua ntaub ntawv, tau txhua lub sij hawm ua ntej nws yuav tag sij hawm. Txawm li cas los xij, koj li kev thim lus yuav tsis cuam tshuam txog cov kev nthuav tawm txog koj cov ntaub ntawv kho mob uas tus (cov) neeg thiab/los sis lub (cov) koom haum uas tau muaj npe teev nyob rau nplooj ntawv dhauf los ua ntej ntawm daim foos no, uas nws nce rau daim foos tso cai no, uas lub sij hawm uas koj thim lus ntawd. Tsis tas li, yog tias daim foos tso cai no tau txais los siv rau lub hom phiaj ntawm kev tuav pov hwm kho mob, koj qhov kev thim lus yuav siv tsis tau rau qee lub sij hawm uas tus tswv koom haum tuab pov hwm sam sim tab tom sib hais txog ib qho kev tsis txaus siab. Rau Cov Chaw Muab Kev Pab Kom Nkag Cuag Tau Rau Kev Noj Qab Haus Huv Hauv Zej Zos (Access Community Health Centers) cov ntaub ntawv, koj qhov kev thim lus yuav tsum yog sau ua ntaub ntawv thiab muab xa mus rau: Cov Chaw Muab Kev Pab Kom Nkag Cuag Tau Rau Kev Noj Qab Haus Huv Hauv Zej Zos (Access Community Health Centers), Tus Thawj Saib Xyuas Kev Phom Sij thiab Kev Nyab Xeeb, 2901 West Beltline Hwy, (608) 443-5545.

Rov nthuav tawm: Yog tias tus (cov) neeg thiab/los sis cov koom haum uas tau tso cai los ntawm daim foos no tau txais koj cov ntaub ntawv kho mob uas tsis muaj kev tiv thaiv tsis yog cov kws kho mob los sis lwm tus neeg uas tau ua raws li tsoom fww txoj kev cai lij choj hais txog kev ntiag tug, cov ntaub ntawv kho mob uas lawv tau txais yuav poob nws txoj kev tiv thaiv los ntawm tsoom fww teb chaws cov kev cai lij choj tswj kev ceev ntiag tug, thiab cov neeg yuav tau txais kev tso cai rov nthuav tawm koj cov ntaub ntawv kho mob yam tsis muaj koj txoj kev tso cai ua ntej.

Kos npe: Feem ntau, yog tias koj muaj hnub nyoog 18 xyoo los sis tshaj saud, koj tsuas yog tus neeg raug tso cai rau kos npe rau daim foos no txhawm rau tso cai rau kev nthuav tawm txog koj cov ntaub ntawv kho mob uas tau txais kev tiv thaiv. Yog tias koj muaj hnub nyoog qis dua 18, koj niam koj txiv los sis tus neeg saib xyuas yuav tsum tau kos npe rau daim foos no sawv cev rau koj. Txawm li cas los xij, muaj ntau lub sij hawm uas txoj cai no tsis siv. Yog xav paub lub qhia ntau ntiv txog tus neeg muaj cai kos npe rau daim foos no, hu rau: Tus Thawj Saib Xyuas Kev Phom Sij thiab Kev Nyab Xeeb, 2901 West Beltline Hwy, (608) 443-5545.

ACHC AUTHORIZATION FOR VERBAL COMMUNICATION AND/OR TO LEAVE VOICE MAIL MESSAGES

This does not authorize release of copies of medical records – Use form ACHC1280490-DT Authorization for Disclosure of Protected Health Information Fax: (608) 662-4444

Index to Auth-Communication

1. Patient Information:

Name – Last, First, MI (Maiden or former name) See Hmong Version			
Street Address See Hmong Version	City See Hmong Version	State See Hmong Version	Zip
Medical Record Number (only if known) See Hmong Version	Birthdate See Hmong Version	Phone Number See Hmong Version	

2. Information to be Disclosed: Verbal communication only re: patient's care – **no copies of medical records provided**

3. Verbal Communication Between:

See Hmong Version and: Name: See Hmong Version
 (list name of healthcare facility or specific healthcare provider/staff member. Listing "ACHC" will cover all ACHC locations) (list first and last name of person(s) to whom your confidential information may be disclosed, such as a community social worker)

AND/OR

Leave **VOICE MAIL** for the patient at the following phone number(s): See Hmong Version
 _____ (voice mail includes any information, unless limited below):
 Limit voice mail only to information specified: See Hmong Version
 (see back of form for notice regarding voice mail messages)

AND/OR

Leave **MESSAGE WITH AN INDIVIDUAL** who answers the phone at the number provided in the box **immediately** above.
Please specify:
 Anyone Name(s) of authorized individual(s): See Hmong Version

4. Purpose of Communication: Continued care, unless specified: See Hmong Version

5. This authorization will expire in one year from signature unless otherwise indicated below:

Give specific expiration date or write indefinite: See Hmong Version

****PLEASE SEE NEXT PAGE FOR FURTHER INFORMATION****

In accordance with the conditions listed above and on the next page of this form, I authorize the use and/or disclosure of my medical information. This authorization includes disclosure of information regarding substance use disorder, psychiatric consults and mental illness, developmental disabilities, genetic testing, AIDS or AIDS-related illness, sexually transmitted infection, and/or HIV test results, unless I limit the disclosure to exclude the following: See Hmong Version

Signature of Patient/Representative: See Hmong Version Date: ___/___/___
 If signed by person other than the patient, print name and state relationship and authority to do so. (See next page for more information)

Print Name: See Hmong Version Relationship: See Hmong Version
 Patient is: Minor Incompetent/Incapacitated Spouse/Domestic Partner of Deceased
 Legal Authority: Legal Guardian Parent of Minor Next of Kin
 Health Care Agent Other: See Hmong Version
 Personal Representative

ADDITIONAL INFORMATION REGARDING AUTHORIZATION FOR VERBAL COMMUNICATION AND/OR TO LEAVE VOICE MAIL MESSAGES

Access Community Health Centers care providers honor a patient's right to confidentiality of protected health information as provided under federal and state law. Please read the following guidelines before signing this authorization.

Release of Information: The information released may be obtained from the medical record of Access Community Health Centers. It may be obtained from multiple paper-based or electronic-based forms (as applicable). It may include data elements from outside sources that are embedded in tables and documents. Copies released from Health Information Management include medical records only.

Sending Authorizations to Access Community Health Centers: Authorizations for Access Community Health Centers can be mailed to Access Community Health Centers, Attn: Release of Information/UW Health, 8501 Excelsior Drive, Madison, WI 53717 or returned to any Access clinic.

Federal HIPAA Privacy Rules: These federal rules indicate when your protected health information may be used or disclosed without your authorization. Please see our Notice of Privacy Practices for additional information. You can find a copy of the Notice of Privacy Practices on the website at <https://accesscommunityhealthcenters.org/>.

Federal Substance Use Disorder Treatment Program Privacy (42 CFR Part 2): The federal confidentiality rules (42 CFR Part 2) that apply to substance use disorder treatment and/or referral records maintained by a Part 2 program prohibit any further disclosure of such records without the specific written consent of the individual whose information is being disclosed or as otherwise permitted by 42 CFR Part 2. However, any disclosure of information carries the potential for unauthorized re-disclosure and the information may not be protected by federal privacy standards.

Wisconsin Right to Privacy: Wisconsin law protects the confidentiality of patient healthcare records and indicates when records may be disclosed without your authorization.

General Designation for Disclosure of Substance Use Disorder Treatment Information: I understand I have made a general designation to disclose substance use disorder treatment and/or referral information to individuals or entities with which I have a treatment relationship. I may request a list of individuals or entities to which my substance use disorder information has been disclosed by contacting Director of Risk Management and Safety, 2901 West Beltline Hwy, (608) 443-5545.

Verbal Communication Only: This authorization allows for verbal communication (both in person and on the telephone) between Access Community Health Center and the designated person(s) on this form. It does not allow for copies of medical records to be released.

Voice Mail Messages: Access Community Health Center care providers and their staff recognize confidentiality as a very important part of your relationship with them. To protect your confidentiality, they will not routinely leave messages on your personal messaging system (voice mail or answering machine or with your spouse, family members or any other individual) unless you specifically give your permission to do so. This authorization may be used to share this information in the manner that you specify.

No Obligation to Sign: You are under no obligation to sign this form, and you may refuse to do so. Except as permitted under applicable law, Access Community Health Centers care providers may not refuse to provide you treatment or other healthcare services if you refuse to sign this form.

Revocation: You have the right to revoke this authorization, in writing, at any time before it ends. However, your written revocation will not affect any disclosures of your medical information that the person(s) and/or organization(s) listed on the previous page of this form have already made, in reliance on this authorization, before the time you revoke it. In addition, if this authorization was obtained for the purpose of insurance coverage, your revocation may not be effective in certain circumstances where the insurer is contesting a claim. For Access Community Health Centers records, your revocation must be made in writing and addressed to: Access Community Health Centers, Director of Risk Management and Safety, 2901 West Beltline Hwy, (608) 443-5545.

Re-release: If the person(s) and/or organization(s) authorized by this form to receive your protected health information are not healthcare providers or other people who are subject to federal health privacy laws, the protected health information they receive may lose its protection under federal health privacy laws, and those people may be permitted to re-release your protected health information without your prior permission.

Signatures: Generally, if you are 18 years of age or older, you are the only person who is permitted to sign this form to authorize the disclosure of your protected health information. If you are under the age of 18, your parent or guardian must sign this form for you. However, there are many situations in which this general rule does not apply. For more information regarding who is authorized to sign this form, contact: Director of Risk Management and Safety, 2901 West Beltline Hwy, (608) 443-5545.