

PATIENT CONSENT ELECTRONIC MEDICAL RECORD ACCESS

What is this consent?

State and federal governments are encouraging all health care providers to use an electronic format for the exchange of health care information. It is believed that the use of an electronic exchange of health care information will lead to better health care for you and may lower health care costs.

The attached consent is your agreement that UNM Health Sciences Center can access your medical records from other health care providers and other health care organizations in an electronic format. This is called "Health Information Exchange." The Health Information Exchange is a secure and privacy-protected computer network. The network and any health care provider or other health care organization that uses it must follow strict federal and state laws designed to protect the confidentiality of your health information. The Health Information Exchange is operated by the New Mexico Health Information Collaborative, an independent, nonprofit organization.

Using the Health Information Exchange UNM Health Sciences Center can see your tests and other treatments from other providers and health care organizations. UNM Health Sciences Center can also access details about your medical condition that you may not be aware of or have forgotten. Since it is all electronic UNM Health Sciences Center can see this information quickly. This information may be important for your treatment or care.

State and federal laws allow your information to be transmitted electronically through a Health Information Exchange unless you opt-out, as described in more detail below. State and federal laws also require your consent to the disclosure of certain information as described in more detail below. In order to insure the privacy of your medical information and to comply with law, the Health Information Exchange does not let UNM Health Sciences Center electronically access or view your information unless you give your consent.

If I give my consent, what will you be able to do?

When you sign this consent, UNM Health Sciences Center will be allowed to have access to your electronic medical records from all of your health care providers and other health care organizations that participate in the Health Information Exchange.

Am I giving up my privacy rights if I give my consent?

Giving your approval for UNM Health Sciences Center to access your medical records from the Health Information Exchange does not mean that you are giving up your right to privacy. It does not mean you are giving up any confidentiality of your health information. The electronic records have the same protection as your paper medical records.

What happens if I don't consent?

You are not required to give your approval/consent. Your health care benefits from your health insurance or government program will be the same. You will still get medical treatment based on the information available to UNM Health Sciences Center, including any information you provide. But, if you do not consent, UNM Health Sciences Center may not have access to important information related to your treatment and care.

What happens if I change my mind after giving consent?

If you change your mind about giving your approval for UNM Health Sciences Center to get access to your information from other providers and organizations through the Health Information

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Exchange you can, at any time, stop the access. You can simply tell UNM Health Sciences Center to withdraw your approval or you can “opt-out” of participation in the Health Information Exchange altogether. See the “Opt-Out” information below.

All medical records are confidential under federal regulations of the Health Insurance Portability and Accountability Act of 1996 (HIPAA). New Mexico and other federal laws also provide special protection for certain medical conditions and/or test results. These special protections are provided for the following medical conditions:

**Viral Hepatitis
Human Immunodeficiency Virus (HIV)
Sexually Transmitted Diseases**

**Genetic Information
Alcohol & Drug Treatment
Behavioral Health Treatment**

Because of these special protections, UNM Health Sciences Center must get your specific approval/consent to access any of your information using the Health Information Exchange regardless of whether you have any of these conditions. Giving your consent for UNM Health Sciences Center to access your information does not mean that you are saying that you have any of these medical conditions.

**PATIENT
REVOCATION OR OPT-OUT**

Under state and/or federal law you have the right to:

1. Not participate in the electronic New Mexico Health Information Exchange. You may OPT-OUT of the Health Information Exchange by contacting New Mexico Health Information Exchange, see information below;

OR

2. Revoke a consent you have previously given. You can take back your permission for UNM Health Sciences Center to see your information. You will not have any penalties for doing this.

YOU MAY OPT OUT OF THE HEALTH INFORMATION EXCHANGE BY ANY OF THE FOLLOWING METHODS:

- Request an opt-out form from your provider
- Get the form by going on to the following website: www.nmhic.org
- Contact NMHIC directly by calling or writing:
By Phone: (505) 938-9900
By Mail: New Mexico Health Information Collaborative
2309 Renard Pl. SE, Suite 103
Albuquerque, NM 87106

It may take up to 30 (thirty) days for NMHIC to process your request once your form is received.

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ATTENTION HEALTHCARE PROVIDERS

If this patient's medical record contains information about viral hepatitis, human immunodeficiency virus or sexually transmitted disease testing, please be aware that the information has been disclosed to you from records whose confidentiality is protected by state law. State law prohibits you from making any further disclosure of such information without the specific written consent of the person to whom such information pertains or as otherwise permitted by state law. A person who makes an unauthorized disclosure of this information is guilty of a petty misdemeanor and shall be sentenced to imprisonment in the county jail for a definite term not to exceed (6) six months or the payment of a fine of not more than five hundred dollars (\$500.00) or both.

If this patient's medical record contains information about Alcohol or Substance Abuse Treatment records please be aware that the information has been disclosed to you from records protected by Federal confidentiality rules 42 CFR Part 2. The Federal rules prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR Part 2. A general authorization for the release of medical or other information is NOT sufficient for this purpose. The Federal rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient.