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Authorization To Release Medical Records

Policy

In accordance with the HIPAA Privacy Rule, when protected health information is to be used or disclosed for purposes other than treatment, payment, or health care operations, the District will use and disclose it only pursuant to a valid, written authorization, unless such use or disclosure is otherwise permitted or required by law.

Procedure

1. The District will obtain signed authorization from all individuals before using or disclosing their protected health information for purposes other than treatment, payment or health care operations, or otherwise

required by law.

2. The authorization form must be fully completed, signed and dated by the patient or patient's personal representative before the PHI is used or disclosed.

Download (PDF)

Free viewers are required for some of the attached documents. They can be downloaded by clicking on the icons below.















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TOP

The C. L. Brumback Primary Care Clinics were granted Federal Tort Claims Act (FTCA) deeming status effective January 1, 2024.

Support

Notice of Privacy Practices

Privacy Policy & Disclaimer

Non-discrimination Notice

ADA Notice

Department of Transportation Notice

Hospital Price Transparency

HCD Facial Covering Policy

Careers - Current Team Members

Compliance

Compliance Hotline: 1-866-633-7233

Compliance Page

Public Meetings

read all public meetings

Social Media

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