



Serve the People Community Health Center (STP CHC)

Consent form for Health Information Exchange (HIE)

Patient's Name:		Date of Birth:	
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At STP CHC, we want to give you the best care. That is why we participate in various HIE's independently operated by local communities, states, and other entities. Participating in an HIE allows your information from various independent caregivers to be readily available when your caregiver needs it.

How HIE benefits you:

- An HIE gives your health care team your medical history information on their computers with just a few clicks. To provide you with the safest, most effective and efficient care possible, authorized clinicians and care teams need a complete picture of your medical history—especially in emergencies, when every second counts. Sharing your information through an HIE allows clinicians and others who support your care to securely share vital medical information electronically. Instead of relying on the slow delivery of fax messages, phone calls and postal service, your caregiver can access critical information the moment it is needed.
- If you received care at STP CHC facility and then receive care from another caregiver or organization, the other caregiver/organization may be permitted to access your STP CHC medical information through such HIEs to support and coordinate your care.
- When traveling or when transitioning your care to other caregivers, an HIE allows the relevant information in your STP CHC electronic health record (EHR) to travel with you, supporting care continuity.

How Information is shared in HIE:

- STP CHC is also part of national HIEs like eHealth Exchange, CommonWell and Carequality who operate secure data networks (see more below). These HIEs allow STP CHC to gather some of your medical history from other health care providers you have visited who are also participating in such HIEs. In the same way, other health care providers can get access to your STP CHC medical information if you need medical care away from home or if you are referred to a new doctor. Doctors, hospitals, pharmacies, laboratories, skilled nursing facilities and other health care providers can retrieve your medical information securely through HIEs when necessary, as permitted by law.

Examples of when clinicians might share your medical history through an HIE:

- Your primary caregiver can send a healthcare summary to a specialist involved in supporting your overall health. Emergency room care teams may be able to learn about your allergies and see the medical tests you have recently had.
- If you have a stroke or a broken hip, your entire care team—from the emergency room to a rehab facility—can see your important medical information
- Your medical history will only be viewed by health providers that are actively involved in your overall health

CommonWell HIE:

- This HIE is a nationwide secure data sharing network for sharing clinical information securely over the Internet. CommonWell core services aim to enable caregivers to manage patient identity, link patients across organizations, and facilitate secure data access and exchange beyond one's own system or community. These services are essential to the exchange of health data along the care continuum. Contributor members are committed to ensuring provider access to the data is built into their technology.
- CommonWell members have deployed CommonWell services in all 50 states, Puerto Rico and Washington, D.C., and thousands of provider sites are utilizing these services daily. Members are EMR vendors, not health systems – allowing access to any participating group running their system.

Carequality HIE:

- This HIE is a nationwide secure data sharing network for sharing clinical information securely over the Internet. Carequality is an interoperability framework to link numerous data sharing networks, which expands the reach of regional HIEs. These existing health data networks are expanding to include additional providers, payers, government agencies, and others as the Carequality community grows.

With the Health Information Exchange comes the ability for STP CHC to obtain your medication history. Patient medication history is a list of prescription medicines that our provider or other providers have prescribed for you. A variety of sources, including pharmacies and health insurers, contribute to the collection of this history.

The collected information is stored in the practice EHR and becomes a part of your personal medical record. Medication history is very important in helping healthcare providers treat your symptoms and/or illnesses properly and in avoiding potentially dangerous drug interactions.

It is very important that you and your provider discuss all your medications to ensure that your recorded medication history is 100% accurate. Some pharmacies do not make drug history information available, and your drug history may not include drugs purchased without using your health insurance. Also, over-the-counter drugs, supplements, and/or herbal remedies that patients take on their own may not be included.

I hereby agree, consent, and authorize STP CHC, any and all Physicians, Physician’s Assistants, Nurse Practitioners, paraprofessionals including medical students, residents, interns and/or its employees to order or conduct any and all medical/dental/psychological/ diagnostic/radiological studies and treatment, dispense medication, share my electronic health records and access to Health Information Exchange (HIE) including CommonWell and Carequality explained in this consent form, or any and all other treatment, which they consider necessary and/or advisable for my overall health. I also consent and authorize STP CHC to collect and give my pharmacy and my health insurer permission to disclose information about my prescriptions that have been filled at any pharmacy or covered by any health insurance plan.

This consent form remains valid indefinitely. It will only need to be signed again if updated by the clinic.

Printed Name of Patient / Parent/ Tutor / Representative	If applicable, relationship to patient
Signature of Patient / Parent/ Tutor / Representative	Date (MM/DD/YYYY)