**HIPAA & Meaningful Use Disclosure & Consent**

I have received the following information to review:

* Financial Policy Statement
* Notice of Privacy Statement
* I authorize that my insurance/Medicare/Medicaid be billed on my behalf by **Precision Cancer Care** for services furnished to me by that physician or supplier.
* I request that payment of my insurance/Medicare/Medicaid benefits be made on my behalf to **Precision Cancer Care** for services furnished to me by that physician or supplier.
* ePrescribing (as defined by the Centers for Medicare and Medicaid Services):
	+ **ePrescribing** – a prescriber’s ability to electronically send an accurate, error-free and understandable prescription directly to a pharmacy from the point-of-care – is an important element in improving the quality of patient care. The inclusion of electronic prescribing in the Medicare Modernization Act (MMA) of 2003 gave momentum to the movement, and the July 2006 Institute of Medicine report on the role of ePrescribing in reducing medication errors received widespread publicity, helping to build awareness of ePrescribing’s role in enhancing patient safety. Adopting the standards to facilitate ePrescribing is one of the key action items in the government’s plan to expedite the adoption of electronic medical records and build a national electronic health information infrastructure in the United States.
	+ The MMA created a new voluntary prescription drug benefit under Medicare Part D. Although ePrescribing will be optional for physicians and pharmacies, Medicare Part D will require drug plans participating in the new prescription benefit to support electronic prescribing.
		- **NCPDP Formulary and Benefit Standard Implementation Guide Version 1.0**: gives prescribers information about which drugs are covered by a Medicare beneficiary’s prescription drug benefit plan.
		- **NCPDP SCRIPT 8.1 Medication History Transactions:** provides prescribers with information about medications a beneficiary is already taking, including those prescribed by other providers, to help reduce the number of adverse drug events.
		- **Fill Status notifications (RxFill):** allows prescribers to receive an electronic notice from the pharmacy telling them that a patient’s prescription has been picked up, not picked up, or has been partially filled, to help monitor adherence in patients with chronic conditions.
* I understand that while I am a patient with Precision Cancer Care every effort will be extended to respond and provide resuscitation treatments to all patients receiving examination/treatments. A specific physician order (DNR) will be required to exempt a patient from resuscitation efforts. This order must be renewed for all subsequent events. 

By signing this page, I acknowledge that I have received/reviewed the above information and give my consent/authorization for Precision Cancer Care to utilize electronic means, understanding of the DNR policy, along with their financial policy and HIPAA policy as in accordance to the law. I also permit a copy of this authorization to be used in place of the original.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Patient Date

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of Spouse of Responsible Party (DPOA)

****