

PATIENT-PROVIDER COMMUNICATIONS AGREEMENT

Dear Patient:

Electronic communications, including, but not limited to, phone calls, emails, text messages, SMS messages, internet-based video conferencing through applications as Skype and Face Time through iPhones and iPads, for example (hereinafter “Electronic Communications”) provide an opportunity to communicate with your healthcare provider relative to issues that are **non-emergent, non-urgent, and non-critical**.

Your healthcare provider will treat Electronic communications with the same degree of privacy and confidentiality as written records. Your healthcare provider has taken reasonable steps with internal information technology systems to protect the security and privacy of your personal identifying and health information in accordance with the security guidelines required by the Health Information Protection and Accountability Act of 1992, as amended (HIPAA).

However, patients need to be aware that:

- Electronic communications carry risks to confidentiality and security of the transmitted content. The confidentiality and security of your electronic communications cannot be guaranteed.
- Electronic communications should not be considered a replacement for face-to-face contact with Dr. Alaniz that is the very basis of the doctor-patient relationship.
- Urgent Health Matters or Crisis Situations. Electronic communications may not be used for urgent matters that would require a response in less than 72 hours, nor should it be used for life-threatening or serious life-altering matters. **If this is an emergency, or if you have thoughts of hurting yourself or hurting others, please go to an Emergency Room, or dial 911 or for Emergency Services.**
- Dr. Alaniz checks his messages at least once a day on weekdays and sporadically on weekends. Replies may take several days. If you have not received a reply within 72 hours, please call our office. Messages may be viewed and/or responded to by the staff. Messages from patient and replies from provider will be printed and retained in patient’s medical record, if applicable.

Examples of appropriate use:

- Names, phone numbers, addresses of other facilities/providers to which patient is referred
- Routine test results with interpretation and advice
- Instructions for taking medications.
- Patient education – could contain links to educational materials and other resources, including nutritional/diet advice
- Non-urgent telephone messages between patient and provider.
- Appointment Setting
- Provision of provider requested patient status reports (i.e., reporting of blood pressure, weights, glucose levels, and other routinely monitored conditions)

Example of inappropriate use:

- Urgent Health Matters or Crisis Situations. If this is an emergency, or if you have thoughts of hurting yourself or hurting others, please go to an Emergency Room, or dial 911 or for Emergency Services.
- Sensitive and highly confidential subjects (HIV results, drug & alcohol abuse, mental health, etc.) should not be discussed via e-mail. The lack of encryption on your e-mail account could lead to potential interception of the messages. There is also a potential for transmission of messages to unintended recipients.
- Matters with serious consequences or very complicated explanations.

Subject line of message should contain category of message:

- Prescriptions (for questions/refill requests)

- Status report (for provider-requested patient status report – blood pressure, weights, glucose levels, etc.)
- Other (for categories not identified here)

Patient guidelines:

- If patient shares an e-mail account with family members, there is a risk of revealing confidential information. - If allowed to receive provider e-mail at work, patient should check with employer as to the security/ownership/privacy of that e-mail. Employers do often read employee e-mails stored on company servers or computers. Patients who send e-mails from work should expect their e-mails to be read by their employer.
 - Patient will acknowledge receipt of provider e-mail, either with an automatic reply feature of e-mail (if applicable) or by sending a new message to provider with subject line “Received”
 - Replies from the provider will usually come to the e-mail addresses from which you sent the original message. You should not expect to be able to initiate e-mail from one address and receive the reply to a different address.
 - Patients are requested to telephone the office and/or schedule an appointment by telephone if they feel that the e-mail response is insufficient or they have not received a response in 72 hrs and the matter is urgent
 - In the body of the e-mail, patients will include their full name and birth date
 - Patient will categorize their message by indicating the nature of the e-mail in the Subject line (see above, “Subject Line of Message Should Contain Category of Message”)
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➤ I HAVE READ AND UNDERSTOOD THE ABOVE DESCRIPTION OF THE RISKS AND REponsibilities ASSOCIATED WITH ELECTRONIC COMMUNICATIONS WITH HEALTHCARE PROVIDER, AND I HAD THE OPPORTUNITY TO DISCUSS THESE GUIDELINES WITH MY PROVIDER. I CHOOSE TO SEND AND RECEIVE NON-EMERGENT, NON-URGENT, AND NON-CRITICAL PROTECTED HEALTH INFORMATION VIA ELECTRONIC COMMUNICATIONS ACCORDING TO THE ABOVE GUIDELINES. IF I WANT TO DISCONTINUE THIS METHOD OF COMMUNICATION, I UNDERSTAND THAT CAN WITHDRAW THIS CONSENT AUTHORIZING HEALTHCARE PROVIDER TO COMMUNICATE WITH ME VIA ELECTRONIC COMMUNICATIONS AT ANY TIME BY WRITTEN NOTIFICATION TO HEALTHCARE PROVIDER

➤ I UNDERSTAND THAT AT THIS TIME STANDARD E-MAIL SERVICES, INCLUDING BUT NOT LIMITED TO AOL, TIME WARNER, HOTMAIL, GMAIL, AND YAHOO, ARE NOT SECURED AND DO NOT MEET AUTHENTICATION AND ENCRYPTION REQUIREMENTS. THERE IS A RISK OF MESSAGES BEING INTERCEPTED AND READ BY UNAUTHORIZED INDIVIDUALS. PATIENT IS RESPONSIBLE FOR SECURITY AT THEIR END.

➤ I AM AWARE THAT THE PROVIDER HAS THE RIGHT TO REFUSE TO COMMUNICATE VIA ELECTRONIC COMMUNICATIONS SHOULD ANY OF THE INFORMATION REQUESTED ABOVE IS MISSING.

➤ I ACKNOWLEDGE THAT COMMONLY USED ELECTRONIC COMMUNICATIONS ARE NOT SECURE AND FALL OUTSIDE OF THE SECURITY REQUIREMENTS SET FORTH BY HIPAA.

➤ I RELEASE AND HOLD HARMLESS HEALTHCARE PROVIDER, ITS PHYSICIANS AND THEIR STAFF, EMPLOYEES, AFFILIATES, AGENTS, OFFICERS, DIRECTORS AND SHAREHOLDERS FROM ANY AND ALL EXPENSES, CLAIMS, ACTIONS, LIABILITIES, ATTORNEYS FEES, DAMAGES, LOSSES, OF ANY KIND THAT I MAY HAVE RESULTING FROM ELECTRONIC COMMUNICATIONS BETWEEN HEALTHCARE PROVIDER AND ME BASED ON THIS AUTHORIZATION GIVEN TO HEALTHCARE PROVIDER TO COMMUNICATE WITH ME VIA ELECTRONIC COMMUNICATIONS.

BY SIGNING THIS FORM, I AM AKNOWLEDGING THAT I HAVE READ, UNDERSTAND AND AGREE TO ALL OF THE ABOVE, AND HAVE BEEN INFORMED OF THE RISKS ASSOCIATED WITH ELECTRONIC COMMUNICATIONS. IN CONSIDERATION FOR MY DESIRE TO USE ELECTRONIC COMMUNICATIONS AS AN ADJUNT TO IN-PERSON OFFICE VISITS WITH HEALTHCARE PROVIDER, I HEREBY AUTHORIZE HEALTHCARE PROVIDER TO ENGAGE IN ELECTRONIC COMMUNICATIONS WITH ME.

Patient's Full Name (Printed) _____

Patient's Date of Birth _____

Patient's Signature _____ Date _____