UC San Diego Health System

Health Information Exchange Patient Opt-Out Information

This form is to be used by patients who do not wish to participate in UC San Diego Health System’s (UCSDHS) national and regional Health Information Exchange (HIE), or if a patient wishes to rescind a previous decision to opt out. Please read the following information carefully before submitting your opt-out form.

What is a Health Information Exchange or HIE?
A Health Information Exchange, or HIE, is a way of sharing your health information among participating doctors’ offices, hospitals, labs, radiology centers, and other health care providers through secure, electronic means. The purpose is so that each of your participating caregivers can have the benefit of the most recent information available from your other participating caregivers when taking care of you.

What is in my UCSDHS HIE patient record?
Your UCSDHS HIE patient record will include your medications, allergies, current and past test results, and summaries of your past and current health problems. It will not include psychotherapy and sensitive notes or other information that requires your specific authorization to release under federal law. Having timely access to a more complete and accurate health record will help your caregivers work together more easily, make better decisions about your care, eliminate redundant forms, and reduce mistakes, especially in an emergency.

Who can see my records?
Only health care providers who are treating you and their associated staff who are specifically given rights to the HIE network can access your records through UCSDHS HIE. For example, if one of your providers participates in UCSDHS HIE, he or she can access your health information maintained by your other providers who also participate in UCSDHS HIE.

How is my health information protected?
UCSDHS is committed to keeping your records private and secure. Clear and strict federal and state guidelines govern how your health information can be exchanged, viewed, or used. Information that identifies you will not be sold or made available for other purposes. Only those that care for you will be able to view your health information, and only when needed to provide or coordinate your care, make referrals, submit mandatory public health reports (such as your vaccination history), or to provide health care benefits to you.

What can UCSDHS HIE do for me?
If you see multiple doctors who participate in UCSDHS HIE, they may see a more complete picture of your health, and make more informed treatment decisions. The goal is for you to receive coordinated care more efficiently. Your health care information is available to participating health care providers where and when they need it without delay.

Are there risks to opting out?
Yes. The goal of UCSDHS HIE is to provide your caregivers outside UCSDHS secure access to the best available information about your health. By opting out of health information exchange, your caregivers outside UCSDHS may have less information about you when making a diagnosis for you, or when making decisions with you about your care.

I don’t want to participate. How can I opt out?
Your health information will be visible to your caregivers through UCSDHS HIE unless you opt-out using this form or by contacting UCSDHS Health Information Services at (619) 543-5707. You may also opt-out via your MyUCSDChart at http://myUCSDchart.ucsd.edu. Please allow up to two business days for processing your opt out request.

Your choice to opt-out of the Health Information Exchange will not affect your ability to access medical care. Opting out will not prevent your caregivers from sharing your health information with authorized entities when necessary for public health or research purposes that are permitted or required by UCSDHS as well as federal and state law. In cases of medical emergency, your doctor may request to view your health record to diagnose or treat your emergency medical condition and UCSDHS HIE will make your records available under such circumstances.
Health Information Exchange (HIE)  
Patient Opt-Out Form

☐ Opt-Out – UCSDHS may not share my health information through the UCSDHS HIE.*
*Please note that UCSDHS HIE is subject to HIPAA and California laws pertaining to the disclosure of certain health information, such as reporting public health threats. In cases of medical emergency, a doctor may request to view health information to diagnose or treat a patient.

☐ Cancel (Rescind) Opt-Out
I request to cancel my previous decision to opt-out. By completing and signing this form, I am allowing my health information to be accessible to my health care providers through UCSDHS HIE, as permitted or required by UCSDHS or Federal / State law.

All fields must be filled out in order for UCSDHS Health Information Services to process your opt-out request.

__________________________________  ____________________________  ____________________________________
First Name                M. Initial         Last Name

________________________________________________________________________________
Street Address

__________________________________  ______   ____________________________
City       State        Zip

_____ / _____ / ____  Gender: ☐ Male     ☐ Female     Last 4 Digits of Social Security Number: _____________
Date of Birth (mo/da/yr)

__________________________________________  ____________________________  ____________________________
Patient Signature or Legal Representative*       Date    Time

*By signing as a legal representative, I am certifying that I am legally authorized to act on behalf of the patient

Mail the completed and signed form to:

UC San Diego Health System - Health Information Services  
200 West Arbor Drive, M/C 8825  
San Diego, CA 92103-8825

Please allow 2 business days for processing the form. You may also opt-out electronically via MyUCSDChart at http://myUCSDchart.ucsd.edu.

For questions: Call UCSDHS - Health Information Services at telephone 619-543-5707 during business hours (Monday to Friday, 9:00AM – 4:00PM PST).