AUTHORIZATION FOR USE AND DISCLOSURE OF
PROTECTED HEALTH INFORMATION

Each patient has a right to the privacy and confidentiality of his or her medical records. In order to protect that confidentiality and privacy, and in order to comply with the Health Insurance Portability and Accountability Act of 1996 and state laws, the Columbus Division of Fire verifies the identity of each person requesting access to or authorizing the disclosure of protected health information.

*If you are unable to verify your identity, the Division of Fire will neither grant access to nor authorization to disclose, protected health information.*

Requests made to the Division of Fire regarding access to or authorization to disclose protected health information must be made in writing.

The Columbus Division of Fire, pursuant to HIPAA and Ohio Revised Code 3701.74 will provide access to protected health information to, and disclose protected health information pursuant to a written authorization executed by, the patient, patient’s personal representative, or person authorized in writing within the last year to act on the patient’s behalf with regard to medical records. Under O.R.C. 3701.74, a personal representative is defined as a(n):

- minor patient’s parent or other person acting in loco parentis;
- court appointed person;
- person with durable power of attorney for health care for the patient;
- executor or administrator of a patient’s estate; or
- person responsible for the patient’s estate if the estate is not to be probated.

If you are the patient, patient’s personal representative, or person authorized in writing to act on the patient’s behalf regarding medical records, and you come to the medical records office to access or authorize the disclosure of protected health information, please bring government issued identification or other documentation to support your position as a personal representative or authorized person.

If you are mailing the Authorization, please have the form notarized. Also, attach any documentation to support your position as a personal representative or authorized person.

Any questions should be directed to the EMS Records section at 614-645-7384