Consent for Services

Patient Name_

Date of Birth_

I authorize Southdale Pediatric Associates, Ltd. to **provide treatment** to myself or the above named patient.

I authorize **payment** for any and all benefits to Southdale Pediatric Associates, Ltd. It is my responsibility to provide current insurance information. I am responsible for the payment of any remaining balances that are not covered by my insurance, plus any costs that are incurred by Southdale Pediatric Associates, Ltd., in collecting my account.

Southdale Pediatric Associates, Ltd. utilizes the services of an **outside reference laboratory** to perform some of the lab tests ordered by its physicians. The **Reference Laboratory** will bill separately for its services. I am responsible for the payment of any remaining balances that are not covered by my insurance.

Southdale Pediatric Associates, Ltd. will provide me with a copy of their **Privacy Practices** upon request.

Southdale Pediatrics sends text (SMS) messages to the mobile number you have provided in our records. By providing your informed consent where indicated, you acknowledge that you have understood the information included in our Privacy Policy and agree to participate in our text (SMS) messaging service.

Southdale Pediatrics may use forms of AI to help transcribe notes within the electronic medical record.

Southdale Pediatric Associates, Ltd. requires a **24 hour notice to cancel any appointment**. Future services may be denied if a patient fails to keep scheduled appointments.

Southdale Pediatric Associates, Ltd. is committed to providing its employees with a safe, **nonviolent workplace** and reserves the right to determine whether particular conduct violates this policy or is otherwise inappropriate.

In return for access to the **Patient Portal** you agree not to:

- Transmit any electronic information that violates the rights or privacy of any party.
- Use the portal in any way that violates local, state or federal law,
- Transmit any materials that are obscene, defamatory, abusive, slanderous, or otherwise likely to result in harm to others; or
- Intentionally distribute viruses or other harmful computer codes; or have taken any other action that could compromise the security of our computer system.

I authorize Southdale Pediatric Associates, Ltd. to use and disclose my protected health information to:

- Outside Medical Providers:
 - For treatment and continuity of care
- Insurance Companies
 - For claims payments
- Research No patient names or identifying information are ever shared
- Healthcare Operations:
 - For government programs such as MIIC, For e-prescribe databases such as Surescripts,
 - For Health Information Exchange (HIE)
 - _____ I choose to OPT OUT of the sharing of my protected health information with CommonWell Health Alliance
 - For payer network organizations, including clinically integrated networks and/or accountable care organizations.
 - I choose to OPT OUT of the sharing of my protected health information with Fairview's ACO

By signing this form, I agree that I have read and understand the information included on this form. This consent is valid until revoked in writing.

Patient
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What is Health Information Exchange (HIE)?

A health information exchange (HIE) allows healthcare providers to access and share patient medical record data securely and electronically. Different health groups use different EHR, or electronic health record technologies. HIE's allow these different EHR's to share information and talk to one another. It allows doctors, nurses, pharmacists and other health care providers and patients to appropriately access and securely share a patient's vital medical information electronically-improving the speed, quality, safety and cost of patient care.

Appropriate, timely sharing of vital patient information can better inform decision making at the point of care and allow providers to:

- Avoid readmissions
- Avoid medication errors
- Improve diagnoses
- Decrease duplicate testing

For further information go to:

https://www.healthit.gov/topic/health-it-and-health-information-exchange-basics/what-hie

What is CommonWell Health Alliance?

CommonWell Health Alliance is an industry wide alliance creating a nationwide infrastructure that will enable better, more cost-effective care for patients.

CommonWell Health Alliance is a means of enabling health data exchange between providers using various EHR (Electronic Health Record) technologies.

Wherever patients go for care, their past health care information-from within that hospital, within that community, within that region, anywhere within the US-should be available to care providers regardless of where it's needed. Health data should be available to individuals and caregivers regardless of where care occurs.

CommomWell Health Alliance includes over 80 member companies, working across more than 20 care settings. For a full list of providers go to:

https://www.commonwellalliance.org/who-is-connected

What is an Accountable Care Organization?

An accountable care organization (ACO) is a network of doctors and hospitals and other health care providers that share financial and medical responsibility for providing high quality, coordinated care to patients. They agree to coordinate care for patients and deliver the right care at the right time, while avoiding unnecessary utilization of services and medical errors.

ACO's share information via health information exchanges (HIE) to assist them in meeting their goals.