Authorization Form

AUTHORIZATION FOR RELEASE OF MEDICAL INFORMATION

I, ____ [*name of individual*] hereby authorize the use or disclosure of my health information as described in this authorization.

1. Specific person/organization (*or class of persons*) authorized to provide the information:

   ____

   all health care providers and payers

2. Specific person/organization (*or class of persons*) authorized to receive and use the information:

   ____

   Sheet Metal Workers' Local 36

3. Specific and meaningful description of the information:

   Please describe the information you wish to be disclosed.

   Written, electronic and oral information including claims, reports, and other documents related to claims for benefits related to ________________.

   Written, electronic and oral information including test results, reports, and other documents related to diagnoses, tests and treatments related to ________________________.

4. Purpose of the request:

5. Right to Revoke: I understand that I have the right to revoke this authorization at any time by notifying the entity providing the information. I understand that the revocation is only effective after it is received and logged by the administrator of said entity. I understand that any use or disclosure made prior to the revocation under this authorization will not be affected by a revocation.

6. I understand that after this information is disclosed, federal law might not protect it and the recipient might disclose it again.

7. I understand that I am entitled to receive a copy of this authorization.
I understand that this authorization will expire in one year from the date presented. It is, however, my desire that it renew at that time, and at each subsequent year anniversary unless revoked. I, therefore, request that the entity providing information present this to me for renewal as necessary.

____________________________ ________________________

Signature of Individual Date

[*This authorization reflects the requirements of 45 CFR § 164.508 (August 14, 2002).*]