FOR UPMC / HIGHMARK TRANSITION OF CARE

INFORMATIONAL GUIDE for Completing the Authorization for Release of Protected Health Information Form

Patient Information:
- Full Name at Time of Visit
- Birth Date
- Last 4 digits of Social Security Number
- Email Address
- Mailing Address

Recipient Information:
For Physician Office/Medical Facility:
- Facility Name
- Address
- Phone and Fax Number
- Email Address

For Personal Use:
- Recipient Name
- Address
- Phone Number

Authorize Office or Hospital(s):
Name the office or select UPMC hospital(s) where patient was seen.

Send Records via Secured Email:
Select the intended recipient of the records, which will be sent secured to the email address provided above.

Purpose for Release:
Please note that this release is to be used only for transfer of care.

1. Service Type and Date Range:
Select type(s) of records to be released and dates of service*.

Types of Services
Inpatient: Admitted for treatment or surgery with overnight stay in hospital. e.g. Intensive Care, Cardiology, Labor & Delivery.
Same Day Surgery: Treated and discharged same day. e.g. Orthopaedic procedures, hernia repairs.
Emergency Dept: Treatment in Emergency Department.
Outpatient Testing: Not admitted to hospital. e.g. Lab tests, X-rays, EKGs.
Office: Physician office or clinic.

*If patient dates of service are unknown, approximate by month and/or year.

2. Documents to Be Released:
Check specific report(s)/records to be released that correspond with dates of service.

Date, Signature and Additional Documentation:
The patient or patient representative must sign and date the authorization.

If signed by a patient representative, a description of the authority to act for the individual is required. The authorized representative should choose one of the boxes above and provide appropriate documentation.

For Assistance with Completing the Form:
Please contact UPMC’s release of information team at 412-864-0854

To Check on the Status of Your Request:
Please contact HealthPort’s Customer Service Department at 866-425-0174