



Request Restriction or Termination of Previous Restriction On Use and Disclosure of Protected Health Information

Patient Name: _____
Last First MI Maiden or Other Name

Date of Birth: ____ - ____ - ____ Medical Record #: _____ Phone: _____

Address: _____ City: _____ ST: ____ Zip: _____

We are not required to agree to this restriction request unless it is restricting disclosure to a health plan for payment or health care operations for which **you have paid in full**. However, we can remove the restriction if your payment is not honored (such as the check bounces or credit card is refused). Restrictions will not apply when the restricted information is needed for emergency treatment. Voluntary restrictions agreed on by us may be terminated by informing you of the termination.

As listed below, I am requesting that Concentra Place a restriction Remove a previous restriction on the use or disclosure of my protected health information:

Restricted Information: _____

Date of Service: _____ **Restrictions can not apply to workers compensation.**

Do not release the information specified to: _____

Other: _____

SIGNATURE OF PATIENT DATE OR PARENT/LEGAL GUARDIAN/AUTHORIZED PERSON DATE

RELATIONSHIP TO PATIENT

You may submit this form:

- In person: to the nearest Concentra medical center
- By mail: Concentra Privacy Office
P O Box 1438
Louisville, KY 40202-1438
- By fax: 502.508.3700
- By email: PrivacyOffice@concentra.com

FOR INTERNAL USE ONLY

Complete the sections below and email this request to PrivacyOffice@Concentra.com or fax to 502.508.3700

Notice of Decision

- We have accepted the restriction(s) you have requested above.
- We have accepted only the following portion of the restriction(s) you have requested above:

- We are unable to accept the restriction(s) you have requested above.
- By this form, we are informing you that the above restrictions are being terminated.

Signature of Author of Record Title Date Phone

Signature of Staff Member Title Date Phone

Center Name Location Number

