

You are receiving this notice in follow-up to your request for an audit report from HealthInfoNet. If you are not interested in receiving this report, you may discard this information, otherwise please review the following information carefully.

About HealthInfoNet

HealthInfoNet helps you get better, easier, safer care. HealthInfoNet operates a secure computer system that combines your key medical information from separate caregivers to create a single electronic health record. HealthInfoNet takes every precaution to keep your records private and secure and participation is voluntary. For more information visit www.hinfonet.org or call 866-592-4352.

HealthInfoNet keeps track of which providers have looked at your record, including when they looked at it and what parts they looked at. To receive a list of this information (“an audit report”), follow the instructions below.

Receiving your Record Audit Report

To protect your privacy we need to know who you are (“verify your identify”) before we can give you the audit report. To receive your audit report you will need to do one of the following:

1. Fill out and sign the attached form in front of a notary public, have the notary public notarize your signature, and mail the completed form to HealthInfoNet at the address listed on the form.
2. Call HealthInfoNet at the phone number listed on the form to **schedule a time to come to our office in person to fill out the form**. You must bring with you a government-issued picture ID such as a driver's license or passport. This option does not require a notary signature.

Once we have received your completed Record Audit Request Form and verified your identity, your audit report will be mailed to the address you provide on the form within two business days.

Please note: HealthInfoNet can only provide record audit reports to the individuals 18 years of age or older. HealthInfoNet is not positioned to determine who has the legal authority to receive this report for minors. This must be determined by a participating provider. To receive an audit report for someone under the age of 18, or for someone for whom you serve as guardian or health care agent, you must contact their participating provider.

Sincerely,

Devore S. Culver, Executive Director and CEO

HealthInfoNet keeps track of which caregivers have looked at your record, including when they looked at it and what parts they looked at. To request a list of this information (“an audit report”), fill out this form and bring in person or mail to: 125 Presumpscot Street, Box 8, Portland, ME, 04103, or contact HealthInfoNet at 866-592-4352 or 207-541-9250 to have a form mailed to you.

To protect your privacy we need to know who you are (“verify your identity”) before we can give you an audit report. To receive your audit report you will need to do one of the following; fill out this form, have it notarized and send it to HealthInfoNet, or come in person to HealthInfoNet with a government-issued photo ID. Once we have received your completed form and verified your identity, your audit report will be mailed to you within two business days.

First Name	Middle Name	Last Name
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Address	City	State	Zip Code
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Date of Birth <i>(Month/Day/Year) Must 18+</i>	Sex <i>(male/female)</i>	Social Security Number* <i>*This is optional. However, if provided it can be used to make sure we audit the correct record. It will not be shared.</i>
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Daytime Telephone	Email
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Signature of Patient	Date <i>(Month/Day/Year)</i>
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For HealthInfoNet Use Only

On ___/___/___, I attest that the above signer established his/her identity by presenting government-issued photo identification or notary signature and seal.

HealthInfoNet Employee Signature	Print Name
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For Notary Public’s Use Only

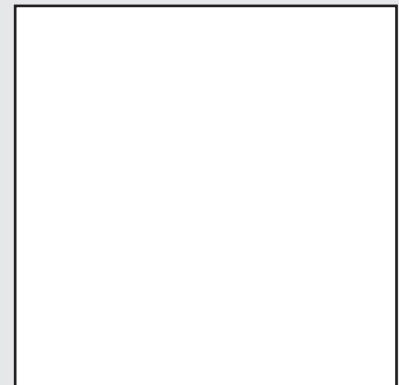
State of: _____ County of: _____

On ___/___/___, before me, _____

Personally appeared, _____

With my signature, I attest that the above signer is personally known to me or established his/her identity with me by presenting government-issued photo identification.

Witness my hand and official seal



Notary Signature	Print Name
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(seal)