

Rapport Benefits Group

HIPAA Authorization Instructions



Attached is a HIPAA (Health Insurance Portability and Accountability Act) authorization that allows Rapport Benefits Group (RBG) and its employees or representatives to act on your behalf to resolve claims, complaints and appeals. You are under no obligation to provide us this authorization or access to your Protected Health Information (PHI).

If you choose to designate Rapport Benefits Group as your representative and allow us access to your PHI, please do the following:

- 1) Print the patient name and Insurance ID number on the Release Form.
- 2) Add the Primary Insured/Subscriber/Employee name (if different), Insurance ID number and relationship to the patient or print same.
- 3) Fill in the patient and primary insured Date of Birth
- 4) Designate the PHI recipient (Rapport Benefits Group). If patient is a child over the age of 13 or someone other than the caller then the patient must also designate the parent /guardian /spouse /partner /caller as recipient of their PHI. Without this release, RBG staff may not disclose PHI to anyone but the patient.
- 5) Print the name of the entity releasing information (doctor, clinic, etc.)
- 6) Specify the information to be disclosed and the reason for the disclosure.
- 7) Specify the duration of the authorization (if any), then sign and date the form. If the patient is a child under the age of 13, the parent or legal guardian may sign a release form on behalf of the child.
- 8) If you are the legal representative of the patient (POA) please include legal documentation substantiation your authority.

Keep a copy of the form for your records. You may return the completed form to RBG in one of the following ways:

- 1) Fax to the number above and include a cover sheet
- 2) Scan and sent to us using encrypted email only.
- 3) Mail a copy of the form to the address above.

Please do not send this information in an unsecured format. Contact Rapport Benefits Group for access to our secure file servers.

Due to the sensitive nature of information relating to chemical dependency, HIV/AIDS and STD's, mental health information or Reproductive Health Care decisions, a separate release may be needed. Please contact your Rapport Benefits Group representative for more information.

Rapport Benefits Group
1423 East 29th Street #335
Tacoma, WA 98404-4008

253.722.5810 – Phone
253.722.5811 – Fax
Service@RapportBenefits.com - Email