

Phone: (510) 447-1311

### Dear patient,

Your medical clinic referred you to Operation Access (OA) and you are eligible for our services. The medical care you receive through OA will be at **no cost to you**. OA is a non- profit organization that coordinates **donated** surgical and specialty care for uninsured people with participating doctors, medical professionals, and hospitals.

The wait time for your first appointment is approximately **2-4 months**, depending on the availability of the doctor who will donate your procedure. We will contact you with the name of the doctor, the hospital, and the date and time of your first appointment when it is scheduled.

We expect the following of **ALL** our patients:

- If you change your address or phone number, or if you no longer need care through OA,
   please call us. If we are unable to contact you, OA may close your case.
- Contact us if you obtain health insurance.
- If your condition becomes an emergency **before** your scheduled appointment, please go to an Emergency Room. Emergency Room costs are not covered or reimbursed by Operation Access.
- If you need routine care, please visit your primary care provider. OA does not coordinate longterm medical care; the care you receive is limited to the outpatient procedure and office visits related to that procedure.
- You are responsible for the cost of any appointments at your referring clinic.
- If you receive a bill related to your procedure, please send us a picture so we can resolve it.

Please communicate whether you agree for Operation Access and its participating healthcare providers to provide medical and management services and authorization the release of your health information as described on the next page.

The following pages describe how Operation Access will protect the privacy of your personal information.

If you need food or housing assistance, or other resources, please call 211.

#### INFORMATION FOR REGISTRATION:

This patient is part of Operation Access, a program that coordinates donated outpatient surgical care. If you have any questions or to ask if an interpreter is on the way, please call us at (415)733-0052. Also, please call us if you have scheduled the patient for any appointment, so that we can ensure that the patient is flagged correctly as a non-billing case. Thank you!

Please call or text us at (510) 447-1311 if you have any guestions or concerns.

# Agreement about providing medical and management services and authorization to release information

**I agree** to permit the following entities to provide healthcare services to me and related management services:

Furthermore, I authorize the following entities to release my protected health information to each other as is reasonably necessary to process my medical referral, my financial assistance application, to assist me in obtaining medical services, and to share the reports of those services with my primary care provider (I recognize this information is to be shared for purposes of treatment, payment and healthcare operations):

- Operation Access,
- the community health center that referred me to Operation Access,
- Sutter Health, Sutter Valley Medical Foundation and its contracted medical groups, Sutter Bay Medical Foundation and its contracted medical groups,
- Kaiser Permanente, The Permanente Medical Group,
- John Muir Health, John Muir Medical Group,
- Providence Health, Providence Medical Group,
- MarinHealth, MarinHealth Medical Network,
- Dignity Health, Dignity Health Medical Group,
- Adventist Health, Adventist Health Physician Network,
- and any other physicians and health care providers that provide services in coordination with Operation Access.

Your agreement and authorization will be collected via text message.

## **About Operation Access**

- You do not have to pay for the service or treatment directly related to the surgery that is approved by a doctor or hospital that participates with Operation Access.
- OA is not obligated to reimburse you for any out-of-pocket expenses that were not authorized or coordinated by Operation Access.
- You are responsible for any ongoing medical care not directly connected to teoriginal referral to OA, which should be coordinated through your primary medical clinic.
- Operation Access is neither a healthcare provider nor an insurance company. The
  participating physicians are not employed by OA; while OA does not check their qualifications
  or monitor the care they provide, all volunteers are licensed and have privileges at the facilities
  where they will perform the procedure.
- Operation Access has no liability for any claim arising from the services of the physicians or hospitals.
- Following the completion of your service, you may be contacted by phone or mail to participate
  in a brief, voluntary survey about the care you received through Operation Access. If you
  choose to not participate in the survey, it will <u>not</u> affect your eligibility to receive care through
  Operation Access.

## **Operation Access Notice of Privacy Practices**

Health information is private and must be protected. There is a federal law that sets rules for health care providers and health insurance companies about who can look at and receive our health information. This law, called the Health Insurance Portability and Accountability Act of 1996 (HIPAA), gives you rights over your health information, including the right to get a copy of your information, make sure it is correct, and know who has seen it.

Federal law requires Operation Access to protect the privacy of information that identifies you and relates to your past, present, and future physical and mental health and conditions ("protected health information").

**How We Collect Information about You:** Operation Access, its employees, and volunteers collect data through a variety of means including but not necessarily limited to letters, phone calls,text messages, emails, voice mails, and from applications, referral forms, and documents.

How We Use Your Protected Health Information: Information is used only as is reasonably necessary to process your application and referral, or to assist you to obtain medical services which may require communication between OA and health care providers, medical product or service providers, pharmacies, and other providers necessary to verify that your medical and financial information is accurate or to determine the type of medical supplies or any health care services you need. You may ask the health care provider to see or get a copy of your medical record and other health information. If you want a copy, you may have to put your request in writing and pay for the cost of copying and mailing. In most cases, your copies should be given to you within 30 days.

Non-uses of Your Protected Health Information: Information about your finances and protected health information that you provide to Operation Access in writing, on the phone (including information left on voice mails), via email, contained in or attached to applications or referrals, or directly or indirectly given to us, is held in confidence. Operation Access does not give out, exchange, barter, rent, sell, lend, or disseminate any information about applicants or clients that is considered patient confidential, is restricted by law, or has been specifically restricted by a patient/client in a signed HIPAA consent form. If you think your rights are being denied or your health information is not being protected, you have the right to file a complaint with your provider, health insurer, or the US Department of Health and Human Services. To learn more, visit www.hhs.gov/hipaa.

Limited Right to Use Non-Identifying Personal Information from Biographies, Letters, Notes, and Other Sources: We reserve the right to use non-identifying information about our clients (those who receive services or goods from or through us) for fundraising and promotional purposes that are directly related to our mission. Clients will not be compensated for use of this information and no identifying information (photos, addresses, phone numbers, contact information, last names or uniquely identifiable names) will be used without client's express advance permission. You may specifically request that NO information be used whatsoever for promotional purposes, but you must identify any requested restriction in writing. We respect your right to privacy and assure you no identifying information or photos that you send to us will ever be publicly used without your consent.