

**NEW JERSEY DEPARTMENT OF MILITARY AND VETERANS AFFAIRS
NEW JERSEY VETERANS MEMORIAL HOMES**

ACKNOWLEDGMENT OF RESIDENTS' PRIVACY RIGHTS

Applicant / Resident's Name _____

PLEASE PRINT NAME

I, _____, hereby acknowledge that I have been advised of the reasons for the solicitation and disclosure of personal **"Protected Health Information" ("PHI")** pursuant to the Privacy Act, Title 5 U.S.C. § 552a .

- A. **AUTHORITY.** The authority for disclosure of PHI is 45 C.F.R. § 164.502(a). PHI may not be disclosed except with my consent or authorization or as explicitly permitted or required by the regulation.
- B. **PRINCIPAL PURPOSES.** The principal purposes for disclosing PHI are (1) to the resident; (2) pursuant to a valid consent by the resident that meets the requirements of the above regulation to carry out treatment, payment or healthcare operations; (3) pursuant to a valid authorization of the resident that meets the requirements of the above regulation; (4) pursuant to an agreement under, or as otherwise permitted by the regulation, and as permitted by 45 C.F.R. § 164.502(a)(1); and (5) as required by 45 C.F.R. § 164.502(a)(2).
- C. **ROUTINE USES.** PHI is required to be disclosed (1) to the resident who is the subject of the PHI when the individual requests it; and (2) to the Secretary of Health and Human Services when the Secretary is investigating a complaint or determining a covered entity's compliance with the regulation. PHI is permitted to be disclosed (3) to the resident him or herself; and, pursuant to valid consent or authorization of the resident (4) to carry out treatment, payment or healthcare operations; and (5) pursuant to an agreement under, or as otherwise permitted by, the regulation.

Signature: _____

Resident Legal Guardian Power of Attorney Next of Kin Other _____

Print Name: _____

Date: _____

***APPLICANT: RETAIN /KEEP THE "NOTICE OF INFORMATION PRACTICES",
RETURN THIS SIGNED ACKNOWLEDGEMENT FORM WITH YOUR
APPLICATION FOR ADMISSION.***

Admissions Officer: File **original** in Social Services section of medical chart
 File **copy** in Admissions File

Revised: October 2006
Revised: July 2007
Revised: May 2009