

DENVER DIABETES COUNSELING

Jenna Eisenberg, LMFT
5650 Greenwood Plaza Blvd, Ste 225K
Greenwood Village, CO 80111
720-420-6541
www.denverdiabetescounseling.com

Authorization to Email/Text Protected Health Information

Client name:

Date of Birth:

Phone:

Address:

Although secure electronic messaging is preferred to unsecure email messaging for communication of protected health information, unsecure email communication and/or text messages containing sensitive health information can be sent between Jenna Eisenberg, LMFT and client. If this form is completed and signed by the client, then unsecure email communication and/or text messages about the client's care and treatment may be used to transmit information between the client and Jenna Eisenberg, LMFT.

Authorize Email/Text Communication

- I authorize Jenna Eisenberg, LMFT to email me regarding the course of my mental health care, treatment and I authorize Jenna Eisenberg, LMFT to email me with questions regarding scheduling and my account status.

Client/representative's email address (please print): _____

****Signature required on next page****

- I authorize Jenna Eisenberg, LMFT to text me regarding the course of my mental health care, treatment and I authorize Jenna Eisenberg, LMFT to text me with questions regarding scheduling and my account status.

Client/representative's phone/text number (please print): _____

****Signature required on next page****

Change Email/Text Address

- I am changing the email address to be used for communications with Jenna Eisenberg, LMFT
New email address (please print): _____

****Signature required on next page****

- I am changing the text/phone number to be used for communications with Jenna Eisenberg, LMFT
New text/phone number (please print): _____

****Signature required on next page****

Discontinue Email/Text Communication

- I no longer wish to communicate via email.
 I no longer wish to communicate via text.

****Signature required on next page****

****Signature required on next page****

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- I understand that any email/text transmission from Jenna Eisenberg, LMFT regarding my protected health information will only be between me/the client and Jenna Eisenberg, LMFT or an authorized representative. I understand that I have the right to authorize Jenna Eisenberg, LMFT to share my information with others, but this requires the completion of another form, *Authorization for Release of Information*.
- I understand that any email/text transmission between Jenna Eisenberg, LMFT and me/the client will become part of my record. These email/text transmissions may be disclosed in accordance with future authorizations.
- I understand that I have the right to revoke this Authorization at any time by indicating so above. If I want to revoke this authorization, I must do so in writing and address it Jenna Eisenberg, LMFT. I understand that if I revoke this Authorization, it will not apply to any information already released as a result of this authorization.
- I understand that this Authorization is voluntary and that I may refuse to sign it. I also understand that Jenna Eisenberg, LMFT cannot deny or refuse to provide treatment, payment, membership or eligibility for benefits if I refuse to sign this Authorization.
- I understand that, once information is disclosed pursuant to this Authorization, it is possible that it could be disclosed by Jenna Eisenberg, LMFT for authorized purposes under the HIPAA privacy rule

Alert for Electronic Communication

Patients and/or personal representatives who want to communicate with their health care providers by email/text should consider all of the following issues before signing an Authorization to Email Protected Health Information:

1. Email/Text to Jenna Eisenberg, LMFT may be intercepted (by virus/hackers), printed and/or stored by Jenna Eisenberg, LMFT.
2. Email/Text communication is a convenience and is not appropriate for emergencies or time-sensitive issues.
3. Highly sensitive or personal information should only be communicated by email/text at the client's discretion.
4. Employers generally have the right to access any email received or sent by a person at work. .
5. Clinically relevant messages and responses will be documented in the client's record at the discretion of Jenna Eisenberg, LMFT.
6. Communication guidelines must be defined between Jenna Eisenberg, LMFT and the client, including (1) how often email will be checked, (2) instructions for when and how to escalate to phone calls and office visits, and (3) types of transactions that are appropriate for email.
7. Jenna Eisenberg, LMFT will not be liable for information lost or misdirected due to technical errors, failures, viruses or hackers, including hacked messages with virused attachments, sent to clients from either of Jenna Eisenberg, LMFT's email accounts: jenna@denverdiabetescounseling.com or jenna@denvermarriageandfamilytherapy.com. If you receive this type of message from one of these accounts, you should contact Jenna Eisenberg, LMFT immediately.

I have read and understand the Alert for Electronic Communications and agree that email/text messages may include protected health information about me / the client, whenever necessary. In addition, all items on this form have been completed and my questions about this form have been answered.

Please note that this Authorization is not valid unless completed in full. This Authorization will not expire unless revoked in writing.

Signature of Client or Client Representative

Date

Signature of Client or Client Representative/Relation to Client

Date

Signature of Provider/Therapist (witness)

Date