

**Request for Special Privacy Protections**  
**Contact Person: Laurie Carr, 303-497-8702, CG4**  
**Fax 303-497-8701**

As required by the Health Information Portability and Accountability Act of 1996, you have a right to request that we restrict our uses and disclosures of your protected health information with respect to treatment, payment and health care operations. You also have a right to request that we restrict our uses and disclosures of your health information with respect to disclosures to members of your family and other relatives or close personal friends or other person you identify who are involved in your care or payment for your care, or to notify or assist in notifying those individuals of your location, general condition or death. UCAR does not have to agree to your request, but if we do, we will abide by our agreement until either of us terminates the agreement.

I hereby request special privacy protection for:

\_\_\_\_\_ (print name and address)

This is a complete list of all restrictions requested. All previous restriction requests are obsolete.

I do not want my health information be disclosed to any of the following:  
 (attach additional pages if needed)

Name	Address
_____	_____
_____	_____
_____	_____
_____	_____

I do not want my health information used or disclosed for any of the following purposes:  
 (attach additional pages if needed)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

_____ Signature	_____ Date
_____ Print name	_____ Telephone

**If not signed by the employee or spouse, please indicate relationship:**

- |  |   |
|--|---|
|  | parent or guardian of minor child                             |
|  | guardian or conservator of an incompetent individual          |
|  | beneficiary or personal representative of deceased individual |
|  | other (specify)   |

**Name of Individual:** \_\_\_\_\_

NOTE: By law, this restriction will not apply with respect to information necessary to provide emergency treatment, for uses or disclosures required by law, or for certain public health activities, judicial and administrative proceedings, law enforcement purposes, coroner investigations, organ or tissue donations, research activities, specialized government functions or workers' compensation activities.