



HIA-F-001 Access to Health Information

Use this form to submit a request for your own health information or if you are requesting health information on behalf of a patient/client. Requests are usually processed within 30 days. Processing time may vary depending on complexity of the request and volume of records. Fees are charged for processing a request for information.

Photo identification (ID) or two pieces of non-photo ID is required to confirm identity. If you are faxing or mailing in (f) Jdf (g) 2

