



BlueCareSM
TennCareSelect
bluecare.bcbst.com

BlueCross BlueShield of Tennessee
Privacy Office
1 Cameron Hill Circle
Chattanooga, TN 37402
Phone: 1-888-455-3824
e-mail: privacy_office@bcbst.com

**Request for Limited Use and Disclosure
of My Health Records**

Full Name of Enrollee (Please print)			Date of Birth		
Last	First	Middle Initial	Month /	Day /	Year
Current Full Mailing Address			Social Security Number		
(PO Box, Rural Route, Apartment Number, Lot Number, Street Number and Name, etc.)					
.....			Daytime Phone Number		
City	State	Zip Code	()		

I am asking BlueCare/TennCareSelect to limit the use and disclosure of my health information on file.

I understand that:

- BlueCare/TennCareSelect will consider my request.
- BlueCare/TennCareSelect does not usually have to agree with my request.
- BlueCare/TennCareSelect may need my OK to use and disclose information for some services. Without my OK, BlueCare/ TennCareSelect may not be able to see if I qualify for services.

I am asking to limit the use and disclosure of the record of my health information

- Tell us what you want limited.
- Write on more pages if necessary.
- Attach it to this page when you send it back.

This is why I want the information limited:

Sign here: X _____ **Date:** _____

Your Right to Change Information in your Record

- You have a right to ask for limited use and disclosure of your information.
- You have a right to have an answer to your request within 60 days. We will tell you if there is a delay in getting you an answer. The delay cannot be more than 30 days. You will get an answer in writing either way.
- If we agree to your request, the use and disclosure of your information will be limited.
- If you ask to end the limitation, we can end our agreement to limit your information. Both of these agreements must be in writing. They will be put in your record. If we have information that was created or received while the limit was in place, it will stay there. It will still be part of the earlier limitation.

You have a right to file a privacy complaint.

Do you have questions? Do you think that your privacy rights have been violated? If you have a question or a complaint, you can contact one of these offices. TennCare Information Line at 1-800-342-3145, Or

Bureau of TennCare

Attn: Privacy Office
310 Great Circle Road
Nashville, TN 37243
Phone: 1-866-797-9469
Fax: 1-615-532-7322

OR

**U.S. Department of Health
and Human Services**

Atlanta Federal Center Suite 3B70
61 Forsyth Street, SW
Atlanta, GA 30303-0064
1-404-562-7886

You will not be punished if you complain or ask for help.

PLEASE DO NOT WRITE BELOW THIS LINE

For BlueCare /TennCareSelect Use Only

Location of Record:	Record Holder:
<input type="checkbox"/> Approved _____ <input type="checkbox"/> Denied _____ <input type="checkbox"/> Delayed _____ If delayed, we will act on your request by _____ Comments _____ _____ _____ _____	
BlueCare/TennCareSelect Representative Signature	Date

**¿Habla español y necesita ayuda con esta carta? Llámenos gratis al BlueCare 1-800-468-9698.
Llámenos gratis al TennCareSelect 1-800-263-5479.**

We do not allow unfair treatment in TennCare.

No one is treated in a different way because of race, color, birthplace, religion, language, sex, age, or disability. Do you think you've been treated unfairly? Do you have more questions or need more help? If you think you've been treated unfairly, call the Family Assistance Service Center for free at **1-866-311-4287**. In Nashville, call **743-2000**.

If you have a hearing or speech problem you can call us on a TTY/TDD machine. Our TTY/TDD number is **1-800-226-1958**.

Need help in another language?

You can call **TennCareSelect** for assistance in any language at **1-800-263-5479**. Call **BlueCare** for assistance in any language at **1-800-468-9698**. Interpretation and translation services are free to TennCare members.

BlueCare Tennessee and BlueCare are Independent Licensees of the BlueCross BlueShield Association.