



BlueCareSM
TennCareSelect
bluecare.bcbst.com

Member Support Services
BlueCross BlueShield of Tennessee
1 Cameron Hill Circle
Chattanooga, TN 37402

Authorization for Use and Disclosure of Health Information

To our applicants and enrollees: By signing this form, you have agreed that we can share your health information. We agree to share only as much information as is needed.

| MEMBER'S INFORMATION | | | |
|------------------------------|---------------------------------|----------------|-----|
| Last Name | First Name | Middle Initial | |
| Member ID number | Date of Birth ____/____/____ | | |
| Address | City | State | ZIP |
| Phone Number | | | |
| REPRESENTATIVE'S INFORMATION | | | |
| Last Name | First Name | Middle Initial | |
| Relationship to Member | Date of Birth ____/____/____ | | |
| Address | City | State | ZIP |
| Phone Number | | | |

I can take away my OK to use or disclose the above information at any time. I must do so in writing.
I understand this change will not change facts that have already been shared. I have reviewed this form.
I understand it. I understand that BlueCare/TennCareSelect must follow the law about protecting my information. I understand that the information I authorize a person or entity to receive may be re-disclosed and no longer protected by federal privacy regulations.

Full Legal Signature or Mark of Individual Date

Full Legal Signature or Mark of Individual Date

Full Legal Signature or Legal or Personal Representative

Relationship Date

Full Legal Signature or BlueCare / TennCareSelect Staff

Date

Full Signature of agency staff person making copies
THIS IS A TRUE COPY OF THE ORIGINAL DOCUMENT

Date

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

We do not allow unfair treatment in TennCareSM. 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 Tennessee Health Connection for free at **1-855-259-0701**.

If you have a hearing or speech problem you can call us on a TTY/TDD machine.

Our TTY number is 711 and ask for **888-418-0008**.

Do you need help with this information? Is it because you have a health, mental health, or learning problem or a disability? Or, do you need help in another language? If so, you have a right to get help, and we can help you. Call BlueCare Customer Service at **1-800-468-9698** for more information.

Do you have a mental illness and need help with this information? The TennCare Advocacy Program can help you.

Call them for free at **1-800-758-1638**.

Need help in another language? Call BlueCare for assistance in any language at 1-800-468-9698 or the numbers below. Interpretation and translation services are free to TennCare members.

Foreign Language Lines call if you need help and need to speak with someone in one of these languages:

| | |
|-------------------------------------|----------------|
| العربية (Arabic) | 1-800-758-1638 |
| Bosanski (Bosnian) | 1-800-758-1638 |
| كوردی - بادینانی (Kurdish-Badinani) | 1-800-758-1638 |
| كوردی - سۆرانی (Kurdish- Sorani) | 1-800-758-1638 |
| Soomaali (Somali) | 1-800-758-1638 |
| Español (Spanish) | 1-800-758-1638 |
| Người Việt (Vietnamese) | 1-800-758-1638 |



BlueCross BlueShield of Tennessee
1 Cameron Hill Circle | Chattanooga, TN 37402
bluecare.bcbst.com