



Authorization for Release of Information

From time to time Hearing Health Solutions would like to communicate special offers, discounts, promotions, information about new products and technology and/or other specials to you.

Please indicate the methods in which we may communicate with you about these items:

	Yes	No	
Email	<input type="checkbox"/>	<input type="checkbox"/>	_____
US Mail	<input type="checkbox"/>	<input type="checkbox"/>	_____
Phone	<input type="checkbox"/>	<input type="checkbox"/>	<u>Home</u> _____ <u>Cell</u> _____

I understand:

- I may refuse to sign the authorization.
- If I refuse to sign this authorization my treatment, payment or eligibility for benefits will not be affected.
- This authorization will remain in effect until revoked.
- My Protected Health Information (PHI) on record with Hearing Health Solutions, including my demographics, hearing history and/or hearing aid history may be used.
- PHI disclosed pursuant to this authorization may be redisclosed by third party recipient(s) and may no longer protected by this authorization or federal privacy regulations.
- Hearing Health Solutions may receive direct or indirect remuneration from a third party for certain marketing activities.

I, _____, authorize Hearing Health Solutions to use my Protected Health Information (PHI) so that I may receive special offers, discounts, promotions, information about new products and technology and/or other specials. I understand I can revoke this authorization at any time upon written request by writing Hearing Health Solutions Attn: Privacy Officer 974 Bethel Rd, Ste B, Columbus OH 43214.

Signature: _____

Date: _____

Commitment to our Patients

Hearing Health Solutions is committed to protecting your personal information. We will never sell your information. We may use third party services for mailings or electronic communications that utilize technology to make communications more efficient and cost effective. Hearing Health Solutions is committed to only working with vendors with Privacy Policies that we deem acceptable to protecting your personal information.