INGHAM NEPHROLOGY & HYPERTENSION

Patient Portal Authorization Agreement Follow My Health followmyhealth.com

Patient Name	DOB
Email address	
office and patients who wish to participate. Secertain precautions should be used to minimize conditions of participation. Your signature on the	dical record and secure electronic communications between our cure messaging can be a valuable communications tool, but risks. In order to manage these risks we have imposed terms and his form will demonstrate that you have been informed of these at you accept the risks and agree to the conditions of participation.
messages and information c an only be read by into the Portal site. Using the connection channel.	ryption to keep unauthorized persons from reading data. Secure someone who knows the right password or pass-phrase to log nel between your computer and the Web site, you can read, view, automatically encrypted in transmission between the Web site and
messages while they are in transmission. Howe maintain electronic security. Keeping messages and only the correct individual must be able to your current email address information and to i information, safeguard this information so that information. If you believe someone has learned immediately. Access to the Patient Portal is a f	events unauthorized parties from being able to access or read ever, no transmission system is perfect. We will do our best to a secure depends on participants giving the correct email address, have access to it. You are responsible for ensuring that we have inform us of any changes. Protect your username and password only you or someone you authorize has access to this ed your password, you should go to the Web Site and change it free service, but we reserve the right to change this policy if health care information completely confidential. Please read our
reason. If we do suspend this service we will not any of its staff liable for network or security in acknowledge that you understand the policies a questions have been answered to your satisfact	d we may suspend or discontinue it at any time and for any otify you as promptly as possible. You agree to not hold INH or afractions beyond their control. By signing this agreement, you and procedure, agree to comply with them and all of your ion. If you do not understand, or do not agree to comply with our ent and do not request access to the patient portal.
Patient Signature	
Print Name	

Date _____

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What is the Patient Portal?

The Patient Portal is a web-based system that allows for secure communication and transfer of information between Ingham Nephrology & Hypertension, PC and the patient. When a patient logs into the Portal, current data is pulled directly from the clinic's database and is displayed on the web page. Patient information is NOT stored on the Patient Portal server.

Explanation of and Guidelines for Use of the Patient Portal

Due to patient privacy laws, we do not accept electronic patient communication through traditional email. Our Patient Portal provides a secure method of messaging to ensure your privacy is in compliance with Federal and State regulation.

After logging in to the Portal a patient can:

- · Use the messaging function to communicate with clinic staff
- View results of lab and other diagnostic tests
- View upcoming appointment dates and times
- Share specific data with family and caregivers
- View health summary information
- Request a referral or medication refill
- For assistance please call 1.888.670.9775 or go to support@followmyhealth.com

Response Time

Please do not use the Patient Portal for **urgent** messages. We will respond to non-urgent messages within 24 hours, if you have not heard from us in 3 days please call your Medical Assistant at 517.485.8217 to check the status of your request. Please remember, the Patient Portal is not designed to replace the face-to-face encounter, rather it is designed to supplement those encounters.

Portal Eligibility

Current patients who are 18 years of age or older are eligible to access the Patient Portal.

Privacy and Security

All messages sent to you will be encrypted, Your email address is confidential and protected information. We will protect this information as we do all of your medical information and personal information. We will not purposefully share this information with a third party unless authorized by you or required by law. When your physician is out of the office your emails may be addressed by a covering physician. Access to our internal network and electronic medical records (EMR) is password protected. Use of the Patient Portal is extended as a courtesy to allow enhanced communication between our patients and their doctor. Abuse of this courtesy will result in our discontinuing electronic communication with you.

Getting Started

Read and sign the Patient Portal Authorization . By signing the agreement you are indicating that you have read and agree to all the policies and procedures contained in this document. Once we have received the signed Patient Portal Authorization from you and have authenticated your identity, and have a valid email address you will receive instructions in your email inbox from Follow My Health to create a **User Name** and **Password**. There is a preset **Security Code**, that is either your Social Security number, or the year of your birth. Please record these in a safe place for future reference.

User Name	Password	Security Code
OSCI I MINE	1 435 W OI U	Security Sours