**MHDO CHOICE DISCLOSURE FORM**

You have a choice.

You can change your mind about your choice at any time.

In accordance with Chapter 120: Release of Data to the Public, Section 13, the MHDO will provide the opportunity for any person to choose to *opt out* and have their direct patient identifiers excluded from Level III Data releases. Direct patient identifiers include *patient name, race, and ethnicity.*

All Level III Data requests will be posted on the MHDO website at <https://mhdo.maine.gov/datarequest.aspx>. Individuals who want to **opt out** of a **specific** Level III data release may do so by completing the MHDO Choice Disclosure Form no later than 30 business days after the initial posting of the **data request**. If you opt out of Level III data requests, you will remain *opted out* unless you choose to opt back in via completion of this form.

🞏 I **do not** want my direct patient identifiers released for Level III data request number:\_\_\_\_\_\_\_\_\_\_\_\_ (data request number can be found at <https://mhdo.maine.gov/datarequest.aspx>

🞏 I **do not** want my child/guardian’s direct patient identifiers released for Level III data request number: \_\_\_\_\_\_\_\_\_\_(data request number can be found at <https://mhdo.maine.gov/datarequest.aspx>

🞏 I **wish to** *“opt back in”* and allow my direct patient identifiers to be released in future Level III data requests.

**\*\*Please use a separate form for each person.**

*(Please print)*

|  |  |  |  |
| --- | --- | --- | --- |
| Legal First Name | Middle Initial | Last Name | |
| Other Names you have used (maiden name, etc.) | | | |
| City | State | Zip Code | |
| Daytime/Work Phone # | Date of Birth (MM/DD/YYYY) | Gender  🞏 M  🞏 F | Last 4 digits of social security number |
| Parent/Guardian/Personal Representative Name *(Please print)* | | Relationship | |
| Date | Applicant or Parent/Guardian Signature | | |

**MAIL to:** Maine Health Data Organization, 102 SHS, Augusta, ME 04333 **or**

**FAX to**: (207) 287-6732 or **CALL** (207)287-6722; or toll free 844-383-4060, **TTY**, dial 711