



**AUTHORIZATION FOR RELEASE OF PROTECTED HEALTH INFORMATION  
(Complete All Sections)**

I \_\_\_\_\_ [Individual's Name] hereby authorize the use or disclosure of my health information as described in this authorization.

(1) Specific person/organization (or class of persons) authorized to provide the information:

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(2) Specific person/organization (or class of persons) authorized to receive the information:

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(3) Specific and meaningful description of the information:

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(4) Purpose of the request (If you do not wish to state a purpose, please state "At the request of the individual"):

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(5) Right to revoke: I understand that I have the right to revoke this authorization at any time by notifying LACERA's Privacy Officer in writing at

LACERA  
Attn.: Privacy Officer  
300 N. Lake Avenue  
Pasadena, CA 91101

I understand that the revocation is only effective after it is received and logged by LACERA. I understand that any use or disclosure made prior to the revocation under this authorization will not be affected by a revocation.

(6) I understand that after this information is disclosed, HIPAA privacy rules might not protect it and the recipient might redisclose it.

(7) I understand that I am entitled to receive a copy of this authorization.

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Continued

(8) I understand that this authorization will expire upon the following date or event:

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Signature of \_\_\_\_\_  
Individual \_\_\_\_\_ Date \_\_\_\_\_

**Personal Representative Section**

If a Personal Representative executes this form that Representative warrants that he or she has authority to sign this form on the basis of (Please attach supporting documents):

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**INSTRUCTIONS:**

This form is to be completed for any release of protected health information to anyone for purposes other than health care related treatment, payment, or operations of LACERA's Retirement Health Care function.

**Distribution:**

- Copy 1 to Individual or Personal Representative
- Copy 2 to Member Document Library
- Copy 3 to be attached to information for which this authorization is prepared