

## AUTHORIZATION TO RESCIND MASKING

The Authorization to Rescind Masking form must be completed (i.e. reviewed and signed) by an authorized custodian with whom the patient has a current care relationship and who has access to Netcare/Connect Care. Forms can either be printed and signed *or* electronically signed.

### To Submit Completed Application Requests:

- Fax the completed form to Alberta Health Services, Health Information Management at 403-776-0431, email to [AHS.HIMPIMSpecialistCentralIntake@albertahealthservices.ca](mailto:AHS.HIMPIMSpecialistCentralIntake@albertahealthservices.ca), or drop at the Registration Desk. Incomplete forms will be rejected.
- The mask will be rescinded usually within 3 (three) business days.
- Questions? Contact the HIA Help Desk at 780-427-8089 / Toll free Riteline at 310-0000 / [hiahelpdesk@gov.ab.ca](mailto:hiahelpdesk@gov.ab.ca)

<b>Date of Request</b> (DD/MON/YYYY)	<b>Personal Health Number</b>		<b>Issuing Prov / Terr</b>
<b>LEGAL NAME</b> (Last Name)	(First Name)	(Middle Name)	
<b>Preferred Name (If different from above)</b> (Last Name)	(First Name)	(Middle Name)	
<b>Date of Birth</b> (DD/MON/YYYY)	<b>Contact Numbers</b> (Primary Number)		(Secondary Number)

### A. REQUEST TO RESCIND MASKING BY INDIVIDUAL

I request that the Mask applied to my health information be rescinded so that my health information is readily accessible by Authorized Custodians. I understand that this request to rescind Masking will apply to both the Alberta Electronic Health Record (known as Alberta Netcare) and the AHS provincial Clinical Information System (known as Connect Care).

**Signature of Patient / Individual / Authorized Representative (as per Section 104 of Health Information Act)**

**Signature of Authorizing Custodian**

**Print Name**

**Custodian's Phone #**

**Custodian/Affiliate's Organization & Address (at time form completed)**

### B. REQUEST TO RESCIND MASKING BY CUSTODIAN

As Custodian, I have determined that the Mask **must** be rescinded from the above individual's health information accessible through Alberta Netcare and in Connect Care.

- ☐ For public health and safety reasons
- ☐ For other compelling reasons
- ☐ Due to my professional practice guidelines

**Signature of Authorizing Custodian**

**Print Name**

**Custodian's Phone #**

**Custodian/Affiliate's Organization & Address (at time form completed)**

The individual was informed on that the mask will be rescinded from his/her health information in Alberta Netcare and in Connect Care. The individual was **not** informed. Rationale for proceeding with rescinding:

## A HANDLING REQUESTS BY INDIVIDUALS TO RESCIND MASKING

STEPS	CUSTODIAN RESPONSIBILITIES
1. Complete an AUTHORIZATION to RESCIND MASKING form.	The form: AUTHORIZATION to RESCIND MASKING can be printed from the Alberta Netcare Login page. It must be filled out, signed and submitted via secure FAX or email. Alternatively, the AUTHORIZATION to RESCIND MASKING form is available electronically in Connect Care and can be filled out, signed and submitted at any Alberta Health Services office during an appointment. It is essentially to inform registration staff that a form has been completed so they can complete the masking of the patient's information.
2. Individual in your care with masked health information asks that mask be rescinded. (Can be different Custodian than the one who authorized the masking.)	The individual is directed to an Authorized Custodian of Alberta Netcare with whom he/she has a current care relationship and is able to rescind the masking (An Authorized Custodian as defined by the <i>Information Exchange Protocol v2.1</i> ). [May include physicians, pharmacists, nurses, etc. as determined by the Custodian organization.] The Custodian who is asked to authorize the rescinding of the mask does not need to be the same Custodian who originally authorized the application of the mask.
3. Meet privately, face-to-face. If individual resides far away, complete process by phone. Fill out form on individual's behalf and note on the form if done by phone.	The recommended best practice is for the Custodian and individual to discuss the rescinding of the mask in a private, face-to-face meeting. However, if they are geographically distant, the Custodian can complete the form for the individual, providing his/her identity can be verified. The Custodian documents on the form that the individual's request for rescinding of the mask was transacted by telephone.
4. Confirm individual's identity, and status as Authorized Representative, if applicable.	The Custodian ensures that the requested rescinding would apply to the masked health information: a: of the individual making the request, or b: of an individual for whom the requesting person is able to act as an <u>authorized representative</u> (as per Section 104 of the <i>Health Information Act</i> ).
5. View record to see if a mask is present. If mask in place, proceed with next step. If not, tell individual.	The Custodian logs onto Alberta Netcare or Connect Care to view the individual's record, or that of the individual represented, and checks for a mask. If present, proceed with the rescind process. If no mask is present, inform the individual.
6. Fill out left side of the form (A) with individual and sign.	The Custodian and the individual, or the authorized representative, fill out the applicable portion (left side) of the AUTHORIZATION to RESCIND MASKING form
7. Submit form	Fax to AHS Health Information Management at 403-776-0431, email <a href="mailto:AHS.HIMPIMSpecialistCentralIntake@albertahealthservices.ca">AHS.HIMPIMSpecialistCentralIntake@albertahealthservices.ca</a> or drop off the form at Registration desk.

<p>8. Mask is rescinded usually within three business days.</p>	<p>Once the form is received, the rescinding of the Masking will be completed on Alberta Netcare and in Connect Care usually within three (3) business days.</p> <p>Incomplete or illegible forms may necessitate contacting the individual or the Custodian and may delay rescinding the mask.</p> <p>If the form is completed electronically at an AHS office, the rescinded mask can be applied immediately. Remember to advise the registration staff of the completed form so the request can be completed.</p>
<p>9. Retain original copy on individual's file.</p>	<p>The original form is retained by the Custodian and can be kept on the individual's paper or electronic file.</p>
	<p>No follow-up notice will be sent to the individual or the Custodian from AHS Health Information Management once the mask has been rescinded.</p>

## **B. CUSTODIAN-INITIATED AUTHORIZATION TO RESCIND MASKING**

### ***DELEGATING the AUTHORITY to RESCIND***

Custodians, such as physicians, pharmacists, registered nurses, dentists, optometrists or chiropractors, can delegate affiliates who can initiate rescinding within their organizations. Those affiliates must exercise professional judgment and comply with their professional practice standards as outlined in *IEP* v2.1 and the following guideline. However, the Custodian retains responsibility for decisions made by affiliates to rescind masking within the organization.

<b>STEPS</b>	<b>CUSTODIAN RESPONSIBILITIES</b>
1. Complete an AUTHORIZATION to RESCIND MASKING form.	The form: AUTHORIZATION to RESCIND MASKING can be printed from the Alberta Netcare Login page. It must be filled out, signed and submitted via secure FAX or email. Alternatively, the AUTHORIZATION to RESCIND MASKING form is available electronically in Connect Care and can be filled out, signed and submitted at any Alberta Health Services office during an appointment. It is essentially to inform registration staff that a form has been completed so they can complete the rescinding of the masking of the patient's information.
2. When Custodians become aware of circumstances that no longer meet the conditions for masking, they may initiate the rescinding of a mask. (Can be different Custodian than one who authorized masking.)	The Custodian identifies that one or more of the following has occurred for an individual whose information is masked: a: The mask has consequences for public health and safety b: There are other compelling reasons to rescind the mask c: The masking is no longer consistent with the Custodian's relevant professional practice guidelines. The Custodian who rescinds the mask does not need to be the same Custodian who originally authorized the application of the mask.
3. Fill out the right hand (B. Custodian) portion of the form, check one box, and sign.	The Custodian fills out the right side (B) of the AUTHORIZATION to RESCIND MASKING form. The Custodian checks the box that best reflects the reason for rescinding the mask.
4. Inform the individual by phone or in-person of the rescinding of the mask. Note on form the date when individual informed.	For the three circumstances noted in #2, the Custodian may rescind a mask WITHOUT the individual's consent. However, when a mask has been rescinded, the individual must be informed. It is the responsibility of the Custodian to inform the individual of the rescinding of the mask as soon as possible using secure means such as a telephone call or an in-person conversation. Please note on the form the date when the individual was informed that the mask is authorized to be rescinded.

STEPS	CUSTODIAN RESPONSIBILITIES
5. If unable to contact after reasonable attempts, note rationale on the RESCIND form.	If the Custodian has made reasonable attempts to contact the individual regarding the rescinding of the mask, he/she is to note that the individual has not been informed and document the rationale for proceeding with the rescinding in the absence of having contacted the individual.
6. Submit form.	Fax to AHS Health Information Management office at 403-776-0431, or email <a href="mailto:AHS.HIMPIMSpecialistCentralIntake@albertahealthservices.ca">AHS.HIMPIMSpecialistCentralIntake@albertahealthservices.ca</a> .
7. Mask is rescinded usually within three business days.	Once faxed, the rescinding of the Masking will be completed on Alberta Netcare and in Connect Care usually within three (3) business days. Incomplete or illegible forms may necessitate HIA contacting the Custodian and may delay rescinding the mask. If the form is completed electronically at an AHS office, the mask can be added immediately. Remember to advise the registration staff of the completed form so the request can be completed.
8. Retain Original copy on individual's file.	The form is retained by the Custodian and can be kept on the individual's paper or electronic file.
	No follow-up notice will be sent to the Custodian from AHS Health Information Management once the mask has been rescinded.
<b>REFERENCE:</b> <i>Alberta Netcare Information Exchange Protocol v2.1 Section 5.1: Masking of Information</i>	
<b>ALSO SEE:</b> <a href="#">APPLICATION for MASKING – Form and Guideline</a>	
<b>NEED MORE HELP?</b> <ul style="list-style-type: none"> <li>✧ For further information related to the masking process or for assistance filling out the form, call the HIA help desk at 780-427-8089 or email: <a href="mailto:hiahelpdesk@gov.ab.ca">hiahelpdesk@gov.ab.ca</a>.</li> <li>✧ For information about submitting to AHS and the technical application of the mask, email AHS Health Information Management office at <a href="mailto:ConnectCare.Confidentiality@albertahealthservices.ca">ConnectCare.Confidentiality@albertahealthservices.ca</a>.</li> </ul>	