Middle Initial

## REQUEST FOR CONFIDENTIAL COMMUNICATIONS FORM

The Kenton County Airport Board ("Board") considers your medical and billing information confidential. You have the right to request we communicate with you about medical and billing matters by an alternative delivery (e.g., mail, phone) or alternative location (e.g., address, phone number).

The Board will review all requests and accept those we can reasonably accommodate. We will not ask the reason for your request, but we may ask how payment will be handled. Your request will be in effect until you change or rescind it by submitting a new request through another use of this form.

First Name

## 1. Individual Information

Last Name

I.D. Number (If Applicable)	Social Security Number		Birth Date (MM/DD/YYYY)			
Street Address			City, State and Zip Code			
Daytime Telephone Number (include area code)						
This is a:						
□ New Request	☐ Change to Prior Request					
☐ Withdrawal of Previous Request						
2. Request for Confidential Communication						
I request that the Board accommodate the following for confidential communications (check the delivery method and address or phone number):						
☐ Delivery Address:				_		
_				_		
☐ Telephone:				_		

□ Other:			
The information for which the request for confidential co	ommunications i	s made:	
□ All PHI			
□ Other:			
If such request is granted, this request will only apply above.	to the commun	nications you designated	
Signature of Individual	Date		
Printed Name of Individual		1	
Individual's Street Address	City, State	City, State and Zip Code	
Signature of Individual's Legal Representative (if appl	Date		
Printed Name of Individual's Legal Representative (if	applicable)		
If this request is signed by the Individual's Legal Reprehealth care power of attorney or other relevant de Representative to act on behalf of the Individual,, as app	ocument legally		
Return this completed form to:  Kenton County Airport Board			

Kenton County Airport Board
Scott Gibbons
Vice President Business Administration
P.O. Box 752000
Cincinnati, Ohio 45275-2000

Facsimile: 859-767-7813