

**Designation of Patient Advocate and Living Will**  
(also referred to by many as a Health Care Power of Attorney)

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For those of you that have a "Designation of Patient Advocate and Living Will" (also referred to by many as a Health Care Power of Attorney) signed and dated before May of 2003, please pay careful attention to the information below:

In April 2003, the Health Insurance Portability and Accountability Act of 1996 (HIPAA) took effect. The law was designed to protect the privacy of your medical records. Unless the patient provides express authorization, the new rules restrict access to protected health information. The restricted information includes such things as the patient's name, social security number, address, date of birth and condition of the patient. In fact, medical records cannot be obtained without the patient's consent.

As a result of HIPAA, previously signed Designations of Patient Advocates and Living Wills are not sufficient enough to give the "Advocate" authority to act on the patient's behalf or obtain information on the patient's condition. This office has prepared an amendment that will allow your agent to access your medical information and continue to make medical decisions for you. To simplify the update of your document we have provided the necessary language below. Please print off the language below and sign as indicated in the presence of two witnesses. Once signed, attach this amendment to your original Health Care Power of Attorney or Patient Advocate Document and provide a copy of the amendment (or the entire document) to your physician. If a copy of this document was also provided to your Advocate, make sure a copy of the signed amendment is provided as well.

Please click on the link below which will take you to the attachment page. Print this page to keep with your records.

**Attachment to Designation of Patient Advocate and Living Will Medical Records - PDF**

Thank you. If you have any questions please contact our office using the numbers and/or email listed below.