



## **COMMUNITY HEALTH REPRESENTATIVES** **CLIENT REGISTRATION POLICY**



The goal of the CHR program is to provide high quality services aimed at improving our community's overall health. CHR provides many outstanding services to our registered clients including medication delivery, home visits, telephone welfare checks, child passenger safety seat classes, optical services as well as non-emergency medical transportation to name a few.

Any person who is a member of a federally recognized tribe including Alaskan Native **or** receives services at the Parker Indian Health Center **and** lives within the borders of the CRIT reservation (Big River, TOP, up to Cienega Springs) may register with CHR.

To be able to provide these services CHR requires clients to register with our program. Registration includes just three documents to be completed; a CHR registration form, proof of Tribal affiliation (tribal id) or I.H.S demographic face sheet and a HIPAA notice of privacy practice form.

### **Demographic Form:**

- Includes the clients name, date of birth, phone number, address, emergency contact information, insurance eligibility, etc.
  - This information is needed for all of the services that CHR provides.
- For example, CHR needs the client's address for transportation, home visits, deliveries etc., we will need the client's DOB to pick up medications, we will need the client's phone number to contact them prior to pick-ups, we use the client's insurance eligibility to refer them to outside services, and if the client were to have an emergency while CHR is providing services we will need their emergency contact information.

### **Proof of Tribal Affiliation:**

- Because CHR is a program under I.H.S. contract, we must verify that all clients have proof of tribal affiliation.
- CHR will scan client's Tribal ID upon registering, **or**
- The client can sign an IHS disclosure form. This form will be sent to IHS and IHS will provide CHR with a face sheet, verifying that the patient does receive services at PIHC.

### **CRIT HIPAA Privacy Practice Form:**

- CHR provides each client a copy of CRIT HIPAA privacy practice notice.
- Upon registering, the client must sign a document stating that they read and understand their rights to privacy and rights to access their own records.