EZ-NET USER REQUEST FORM

eznet.rchsd.org

PLEASE EMAIL COMPLETED FORM TO EZNetsupport@rchsd.org

Please Note: Access levels will be determined based on position/title and business need.
***User Login and Password will be sent VIA EMAIL to the requestor's email address listed below.**

DATE:_____ _____ NEW USER _____ EDIT USER _____ DELETE USER

NAME: LAST _____ **FIRST** _____

TITLE: _____ ***E-MAIL:** _____

TELEPHONE: _____ **FAX:** _____

OFFICE/DEPARTMENT NAME: _____

OFFICE ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

OFFICE TYPE: _____ **FAX NO**: _____
(PCP; SPECIALIST; ANCILLARY; ADMIN; ETC.)

PROVIDER TAX ID #: _____ **SUPERVISOR NAME:** _____

Confidentiality Statement
Through the EzNet system, the User will have access to confidential patient and financial data. User agrees that State/Federal laws and regulations regarding patient privacy and confidentiality also apply to electronic data. User agrees to maintain the confidentiality of all information received via the EzNet system in accordance with all applicable state and federal laws and regulations.

_____
User Signature

Provider Warranty and Approval
Provider agrees that State/Federal laws and regulations regarding patient privacy and confidentiality also apply to electronic data. Provider warrants the User understands and agrees to maintain the confidentiality of all information received via EzNet system in accordance with all applicable state and federal laws and regulations.

Provider confirms/approves access for the above User.

_____
Provider or Supervisor Signature

**************************************ADMIN USE ONLY**************************************

COMPANY	ACCESS LEVEL		
	CLAIMS	ELIGIBILITY	AUTHORIZATIONS
Choc Health Alliance			

CHOC Health Alliance Approval: _____ Date: _____

Rady Children's Approval: _____ Date: _____

**********************To be completed by Information Services Department**************************

User Login: _____ Password: _____

Note: Password must be changed the first time user logs into EzNet

Completed by: _____ ***Date Created:*** _____