

**RMS Merge Referral Portal (MRP)**

<https://refer.rms-radiology.com/portal.web>

Access Request Form

Fax to 319-626-7314 attn: Jessica

First Name*	
Last Name*	
Organization*	
Email*	
Phone	
Title*	

(\*required)

If new physician please include NPI #

**Confidentiality Agreement:**

In consideration for RMS’s agreement to provide you and your employees with access as requested above, you hereby agree to the following terms and conditions:

1. You will access the MRP for the sole purpose of obtaining information about your patients, i.e., those with whom you have a direct treatment relationship. You will obtain any and all patient authorizations, if any are necessary, to allow access to patient information via MRP.
2. You agree that the information contained in MRP is “protected health information” (PHI) within the meaning of the federal HIPAA Privacy and Security Rules, and you agree to keep the information private and secure consistent with those Rules, and further to use and disclose the information only in circumstances permitted by the Rules.
3. You understand and agree that there will be an ongoing process of monitoring of all users’ access to MRP; moreover you agree to promptly respond to any questions posed by RMS as a result of its monitoring processes.
4. You understand and agree that the violation of any terms of this Agreement by you or your employees or agents, representatives, and/or independent contractors may result in termination or restriction of your access to MRP>
5. RMS reserves the right to report any violation of this Agreement with regard to security or privacy of the PHI contained in MRP, as a HIPAA violation to the appropriate authority, including the Office of Civil Rights.
6. You agree to indemnify and hold harmless RMS, its shareholders, offices, directors, employees, and agents for any costs, expenses, claims, or damages incurred as a result of or in connection with the use of MRP by you and your employees or agents, representatives and/or independent contractors. This indemnity provision shall survive the termination of this Agreement.
7. The confidentiality of all information, which you or any of your employees, agents, representatives or independent contractors access via the MRP, shall survive the termination of the Agreement and your access to the MRP.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 2024

Signature\_\_\_\_\_

Instructions to access your new account will be emailed to you when your account has been created.