

Patient Authorization to Disclose Health Information

A copy of this completed form must be provided to the patient

Pursuant to the Health Insurance Portability and Accountability Act, 45 C.F.R. Parts 160, 164

1. Authorization

I hereby authorize _____ (HIPAA Covered Entity, hereafter known as COVERED ENTITY) to disclose protected health information as described below to _____ (Food Bank, hereafter known as RECIPIENT).

2. Effective Period

This authorization for release of information covers health information from:

a. ☐ all past, present, and future time periods

OR

b. ☐ _____ to _____

3. Extent of Authorization

I authorize the release of my information in my health record related to diet and nutrition needs with the exception of the following information (check all that apply):

☐ Mental health records

☐ Communicable diseases including HIV and AIDS

☐ Treatment for alcohol or drug abuse

☐ Other (please specify): _____

4. Use of Information

I understand that RECIPIENT will use my information in order to assist me with managing my dietary needs, including as they relate to my health care needs.

5. Expiration

This authorization shall remain valid until _____ (date or event), at which time it will expire.

6. Right to Revoke

I understand that I may revoke this authorization in writing at any time before it expires. However, I also understand that my revocation will not apply to any disclosure of my health information made in reliance on this authorization before COVERED ENTITY has received my revocation.

7. Condition of Provision of Services

COVERED ENTITY may not condition the provision of services on my completion of this authorization. However, I understand that this authorization is required for COVERED ENTITY to share my health information with RECIPIENT.

8. Risk of Redislosure

I understand that after releasing my information in accordance with this authorization, COVERED ENTITY is not responsible for any subsequent uses or disclosures of my information by RECIPIENT or any other entity or individual. RECIPIENT may not be subject to HIPAA.

9. Signature

Patient Signature _____ Date _____

Health and Welfare Council of Long Island

Do you skip meals to afford college costs? SNAP may be able to help you.

Are you working while going to school and still don't have enough money for food? SNAP can help students, like you, have enough to eat.

The Nutrition Outreach and Education Program (NOEP) can help you learn if you may be eligible for SNAP. NOEP can also help you complete and submit your application.

Call today. It is free and confidential.

**Agency Name: Health and Welfare Council of Long Island
Nassau & Suffolk County
NOEP contact #: 516-505-4431**

Island Harvest:

SNAP Outreach and Application Assistance

SNAP can help you put food on the table. Do you need help applying or want to see if you qualify?

***Call the Island Harvest SNAP Hotline for a quick and confidential screening over the phone: 631-873-4775 or 516-805-1642**

La línea de asistencia de SNAP también está disponible en español: 516-805-1642

Call today to:

- See if you qualify for SNAP/Food Stamps and other food assistance programs
- Complete the SNAP/Food Stamp application online
- Find out what documentation is necessary to apply
- Receive referrals to other programs and resources in your area
- Complete the SNAP/Food Stamp re-certification application or make changes to your current SNAP/Food Stamp case
- Resolve individual application issues

All services are free and confidential. Todos los servicios son gratuitos y confidenciales.

Food Pantries:

<https://www.licares.org/find-food/>

Amityville

St. Martin of Tours – Parish Outreach
41 Union Ave.
Amityville, N.Y. 11701
(631) 264-4840
smtoutreach@optonline.net
www.stmartinschurch.net

Commodities Supplemental Food Program
143 Schleigel Blvd.
Amityville, N.Y. 11701
(631) 789-9533
www.catholiccharities.cc

EOC - Family Development Center
48 Cedar Road
Amityville, N.Y. 11701
(631) 842-6100
<http://www.eoc-suffolk.com/family-development.php>

Grace Community Church
117 Columbus Blvd
Amityville, NY 11701
(631) 842-3486
www.gracechurch.org

Hollywood Baptist Church
2 Monroe Street
Amityville, NY 11701
(631) 842-7091
www.hollywoodfullgospel.com

Mount Nebo Missionary Baptist
46 Glenmalure St.
Amityville, NY 11701
631-842-4073 or 631-789-1784
www.mtnebo.tripod.com

Bay Shore

Bay Shore Assembly of God Food Pantry
211 Bay Shore Road
Bay Shore, NY 11706
(631) 665-5241
www.bayshoreag.org

First Baptist Church
175 Second Avenue
Bay Shore, NY 11706
(631) 665-8863
www.fbcbayshore.org/foodpantry

Pronto
128 Pine Aire Drive
Bay Shore, NY 11706
(631) 231-8290
www.prontolongisland.org

River of Life
45 Pineaire Drive
Bay Shore, NY 11706
(631) 231-5732

St. Patrick's Roman Catholic Church
6 Fifth Ave
Bay Shore, N.Y. 11706
(631) 665-4917
www.stpatricksbayshore.org

Brentwood

God's Provision, Inc.
Crooked Hill Road
Brentwood, NY 11717
(631) 475-2479
www.cityroof.org

St. Luke's Parish Outreach
266 Wicks Road
Brentwood, N.Y. 11717
(631) 435-3931
www.sanlukes.org

St. Anne's Parish Outreach
88 Second Ave.
Brentwood, N.Y. 11717
(631) 283-8113
www.stannebrentwood.org

Central Islip

St. John of God
84 Carleton Ave.
Central Islip, N.Y. 11722
[\(631\)234-1884](tel:6312341884)
www.stjohnofgodparish.org

Central Islip Civic Council
68 Wheeler Rd.
Central Islip, N.Y. 11722
[631-348-0669](tel:6313480669)
www.centralislipciviccouncil.org

Copiague

Our Lady of Assumption Church
115 Leonardo DaVinci Street
Copiague, N.Y. 11726
[631-842-5211](tel:6318425211)
www.olacopiague.org

F.E.G.S.
445 Oak Street
Copiague, NY 11726
[631-691-7080](tel:6316917080)
www.fegs.org

Wyandanch

Gerald Ryan Outreach
Our Lady of Miraculous Medal
1434 Straight Path
Wyandanch, NY 11798
[631-643-7591](tel:6316437591)
www.olmm-wyandanch.org
www.geraldryanoutreach.org

Farmingdale College Partners:

- **Farmingdale State College on Campus Food Pantry:**
<https://www.farmingdale.edu/foodpantry/>

Community Eligibility

- The pantry is open to all currently enrolled Farmingdale State College students, faculty, and staff.
- A valid FSC RAM ID # and FSC email are required.
- Food Pantry users must complete a brief order form.

Pantry Process

Order forms are only available online. Our goal is to provide individuals using the food pantry confidentiality. When the order is submitted, a code number will be assigned for the individual to use to identify the order at pick up. FSC Community members must complete their intake form by the deadlines listed below to ensure their order is fulfilled.

- **St Kilians Church:** Our Outreach Program offers assistance to those in need who live within our parish boundaries. Questions? Call us Monday to Thursday from 9am-12:00pm at 516-756-9656. We look forward to speaking with you!
- 407 Main Street, Farmingdale, New York 11735

<https://d2y1pz2y630308.cloudfront.net/11377/documents/2021/6/Website%20Get%20Help%20from%20Outreach%202021-07-2.pdf>

What is in an average pantry bag?

- Milk
- Fruit juice
- Meat
- Potatoes, pasta or rice
- Eggs
- Chips
- Butter or margarine
- Yoghurt or other dessert
- Candy or similar treat