



Dear Patient,

The Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) and The Commission to End Health Care Disparities have come to together to ensure that all patients get the best care possible. We must collect Race and Ethnicity data in order to improve your PHR (Personal Health Record) and our EMR (Electronic Medical Records). In order to comply with these guidelines, we would like you to tell us your racial/ethnic background so that we can review the treatment that all patients receive and ensure that everyone receives the highest quality of care.

Print Name

Date

Ethnicity Question

Do you consider yourself Hispanic or Latino?

Yes
No
Declined
Unavailable/Unknown

Race Question

Which category best describes your race?

American Indian/Alaska Native
Asian
Black or African American
Native Hawaiian/Other Pacific Islander
White or Caucasian
Other
Hispanic/Latino (Please specify)
Declined
Unavailable/Unknown

Language Question

In which language would you feel most comfortable reading medical or health care instructions?