

Authorization to Use and Share PHI on Social Media

CCRM Management Company, and our subsidiaries and affiliates (together, “we”, “us” and “our”) appreciate that you are willing to share about your journey with us on social media. With your permission, we would like to share the interview we are recording with you about your journey with us (the “Interview”) on our own social media page.

By clicking “I consent” below or otherwise executing this Authorization to Use and Share PHI on Social Media, you authorize us to use and share your the Interview, which may include your social media handle, health information about you, photographs and any other content that you may have included in your post (collectively “Your Content”) on our social media pages.

Our social media pages are publicly available, so users of the pages and others may be able to view Your Content. After we repost Your Content, it may be redisclosed and no longer be protected by HIPAA.

You do not have to agree to this Authorization or otherwise give permission for us to share Your Content. We will not condition any treatment, payment, enrollment or eligibility for benefits on your agreement to this Authorization.

This Authorization lasts for three (3) years from the date of your signature below, unless a shorter period is required by law. You may revoke this Authorization in writing at any time by mailing a letter requesting such revocation to 9380 Station Street, Suite 425, Lone Tree, CO, 80124 or via email to contentmarketing@ccrmivf.com. Any revocation will not apply to PHI used or shared by us prior to the time we receive your notice of revocation.

You are entitled to a copy of this authorization and will receive a copy by contentmarketing@ccrmivf.com.

* * *

I have read and consent to this Authorization.

I consent

Signature

Date