



### Ethnicity and Race Questions

#### BACKGROUND INFORMATION

The Centers of Medicare and Medicaid Services rules require South Alamo Medical Group to collect information on the race/ethnicity backgrounds of our patients for Meaningful Use (§170.314(a)(3) Demographics).

We are required to ask patients to identify their own race and ethnic backgrounds.

#### QUESTIONS

##### Question #1 Nationality or Ethnic Background

You identify yourself as:

- Hispanic/Latino - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race
- Not Hispanic/Latino
- Refuse to answer this question/Decline

##### Question #2 Race

You identify yourself as:

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White
- Other Race
- Refuse to answer this question/Decline

Name:

Date:

Signature: