MyChart Proxy Access Request Form	
MRN:	
DOB:	
Name:	

The last roay Access Request Form

Thank you for your interest in MyChart, the electronic medical record portal for M Health Fairview. MyChart lets you (or a parent/custodian for minors) access many parts of your medical record. You can talk with your care team, view your test results, ask for medicine refills and set up appointments.

You can also give someone else access to your records in MyChart. This is called a **proxy**. Your proxy might be a spouse, parent, adult child or someone who helps you manage your health. You must have Internet access and an email address to use MyChart. Once you're set up, you or your proxy can use the secure MyChart website or mobile app.

Adults can grant or revoke MyChart proxy access to anyone they choose, or revoke (cancel) access from anyone they choose in the **Share My Record** section of their MyChart. No form needs to be completed to do that.

- For children aged 0-11, parents or legal custodians will be given full access to the child's MyChart record. Parents must be listed as the mother or father in the child's medical record in order for access to be granted. This access expires when the child turns 12. Each parent needs to fill out their own form to gain access to the records of their child(ren). A separate form must be completed for each child. All non-parent access requires proof of authority (i.e.: custody order, foster authorization, or delegation/temporary custodian document). This proxy access expires when the legal authority ends.
- If you are a minor aged 12-17, your care team needs to be involved in giving you and your parent, or legal custodian, access to your MyChart. You can have full access to MyChart on your own. Your parent or legal custodian can also be given access with your permission. However, due to Minnesota confidentiality laws, this can only be granted at an office with a provider.
- For parents or legal custodians of minors aged 12-17, you will be given limited proxy access to the minor's MyChart record, unless the minor allows access. If the minor and provider agree to this, you will have access to private information that the minor may have shared with their care team. Proxy access expires when the minor turns 18, unless the patient allows full access. All non-parent access requires proof of authority (i.e.: custody order, foster authorization, or delegation/temporary custodian document). This proxy access expires when the legal authority ends.
- For minors 12-17 who are unable to provide consent themselves, your care team needs to be involved in giving your parent or legal custodian access to your MyChart. If a provider agrees to this, full access will be given. Proxy access expires when the minor turns 19 to allow time for legal guardianship to be obtained. All non-parent access requires proof of authority (i.e.: custody order, foster authorization, or delegation/temporary custodian document). This proxy access expires when the legal authority ends.
- For adults: Proof of legal authority is required for proxy access if the patient lacks the ability to grant access themselves (i.e.: Guardianship order or Health Care Directive). This proxy access expires when the legal authority ends.

Authorizations to Access Protected Health Information in MyChart

MyChart terms and conditions will be presented to you the first time you log in to MyChart. You must agree to those terms and conditions to use MyChart.

I allow Fairview Health Services and its partners to release medical information through MyChart to my proxy, named on the next page. I ask that you release this information for the following reason:

☐ Personal use	□ Other: _	

Please release all information as allowed through MyChart.

- MyChart information includes visit summaries, messages, diagnostic results and health information from care providers using M Health Fairview's shared electronic medical record. These providers are listed at https://mhealthfairview.org/.
- If I change my mind, I can tell my care team at any time. I can do this verbally or in writing. This will not apply to records that have already been released. I can also revoke any proxy access in the MyChart app.
- If there's something I don't want shared to MyChart, I will discuss that with my care team.
- To be valid, this form must be completely filled out, signed and dated. A copy that has not been altered is as valid as the original.
- If I do not sign this form, I will still be treated for my health concerns.

Defined information (this are by a hild 0.11 and 10.12 are shall 10.1)

• When records are visible to a proxy, M Health Fairview and its partners **cannot** prevent the proxy from releasing your records to a third party.

ratient information (tins can be a child 0-	11, adolescent 12-17, of adult 18+)		
Full Name	Medical Record #		
Address	Birth Date		
Patient Phone I	Patient Email		
Proxy information			
Name	Phone		
Previous Names			
	Birth Date		
Proxy Phone P	roxy Email		
Relationship to patient (parent of minor, leg	gal custodian, foster parent, legal guardian, etc.)		
Is this person a patient at an M Health Fairv	riew or partner clinic?		
Signature of Patient or Authorized Person _	Date		
Signature of Proxy	Date		
Provider Signature for Minor (12-17) Acces	ss Date		
If the patient did not sign and is not under 1	2, what is the reason patient is unable to sign?		
Internal Clinic Use Only:			
\Box Check here when proxy setup is complet	e		
☐ Scan into the registration document table	2.		