####

# HEALTHeLINK Patient Consent Tip Sheet for Participant

**08/13/2024**

**1.0**

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## Patient Consent

Patients will need to authorize a HEALTHeLINK Level 1 consent form to allow a HEALTHeLINK user to have access to that patient’s records. Below are some instructions and information around the consent process.

## Patient Rights and Instructions

* **BOTH PAGES OF THE CONSENT FORM NEED TO BE PRESENTED TO THE PATIENT PRIOR TO SIGNING TO ALLOW THE PATIENT TO GIVE **INFORMED CONSENT****
* Consent is good for all data within HEALTHeLINK’s system for that patient. Patients are not allowed to restrict access to specific data elements within their record. (42 CFR Part 2 data is only accessible by permission)
* If the patient requests access to their records, oblige them to the best of your ability. If you are unable to provide them with access to their own data, HEALTHeLINK can assist. The patient can visit <https://wnyhealthelink.com/for-patients/patient-data-access/> for more information
* Consent is good for **all Current and Future** HEALTHeLINK Participants, regardless of status (Yes, No Except in an Emergency, No Even in an Emergency)
	+ The only way around this is to select Yes, Except Specific Participants or Yes, Only Specific Participants on the form
* The Consent Form will remain in effect until the day the patient changes his/her consent choice or until such time as HEALTHeLINK ceases operation (or until 50 years after the patient’s death; whichever occurs first). If HEALTHeLINK merges with another Qualified Entity, the consent choices will remain effective with the newly merged entity
* By signing this consent, patients are also allowing access to data across the state through Statewide Patient Record Lookup (sPRL)
* Emergency Access can occur unless the patient checks No, Even in an Emergency
* Our consent form is translated into 11 different languages. If you have a large patient population that speaks a language other than English, we will do our best to accommodate your request
* If a patient requests a copy of the consent form signed at your practice, you are required to provide them with a copy. This includes historical consent forms
* If a patient has questions about the consent form, they are allowed to have those questions addressed prior to signing the form. If the practice that is collecting the form is unsure how to answer the patient’s questions, the patient can contact HEALTHeLINK

## Participant Information

* The Participant that is providing the patient the form is acting as a Witness to the consent execution. This includes confirming the person signing the form is the person listed in the demographic information on the form or is a Legal Representative of the patient listed on the form. If the patient contests the validity of the signed consent, HEALTHeLINK is not responsible for the completeness of the executed consent form
* If the patient has previously consented to a Yes and you are able to access HEALTHeLINK records for that patient, simply ask the patient if they wish to change their mind. Unless the patient is declaring a new consent value, DO NOT COLLECT A NEW CONSENT
* Patients can only select one option on a consent form
	+ If the patient selects multiple, the consent will be considered invalid
	+ If the patient selects the Yes Except or Yes Only boxes, the Participant name and address/phone number are required for us to apply said consent
* All consent forms need to be signed by the patient/legal representative. HEALTHeLINK does not accept “Verbal” or “Staff” signed consents. If the patient refuses to sign the consent form, do not write “Refused to Sign” or something similar. Simply do not send HEALTHeLINK the form
* All consent applied to a minor will expire upon that minor patient’s 18th birthday. After the patient’s 18th birthday, a new consent form will need to be collected, signed by the patient/legal representative and not parent/legal guardian
* HEALTHeLINK does not see patients without an appointment. The patient would have to contact us via email/phone first to set up time
* All executed Consent forms should be sent to HEALTHeLINK within 3 business days to the dedicated consent fax line at (716) 206-0039

## Help and Support

For more information or support with training your staff on how to handle patients’ HEALTHeLINK Consent, please contact the Help Desk.

**24/7 Help Desk Support 877.895.4724**

**Local Help Desk Support 716.842.6343**

If you have other questions or are interested in attending our monthly HEALTHeLINK Consent Webinar, please register below:

<https://healthelink.zoom.us/webinar/register/WN_zgpEeDKGTQaC-p6EVDq_1A#/registration>