

### MyHealth Online – Pediatric Proxy Access – Adolescent with Impairment Proxy Access

Proxy Access for MyHealth Online allows an adult to communicate on behalf of an Atrius Health patient, and view components of their medical record.

- Pediatric Proxy Access applies to patients under the age of 13.
- Adolescent with Impairment Proxy Access applies to patients 13 -17 years old who are impaired.

Medical information visible to **pediatric** proxies includes appointments, immunizations, procedures, medications, and test results, including results of STD, HIV, pregnancy and genetic testing. For **adolescents** (age 13-17), clinicians, taking patient confidentiality concerns into account, may release STD, pregnancy and genetic testing results on a case-by-case basis, which would be visible to both the patient and their proxy.

When the patient turns 13, pediatric proxy access will automatically transition to "Adolescent Proxy Access," with the ability to view a limited portion of the teenager's patient's records. Visit myhealth.atriushealth.org/proxy for current proxy information.

## How to obtain Pediatric Proxy or Adolescent with Impairment Proxy Access for MyHealth Online

- The parent/legal guardian can have their proxy access enabled **in person at the child's primary care office (no form required)**, or by completing the Pediatric Proxy Authorization Form (below) and presenting or mailing it to the **child's primary care office** (see Atrius Health locations below).
- If the patient is between the ages of 13-17 years, and is deemed impaired by his/her provider, the provider's signature must be obtained on the authorization form below.
- Requests are processed within 3-5 business days upon receipt. The proxy can access the child's account when they log into **their own** MyHealth Online account.

#### Pediatric Proxy and Adolescent with Impairment Proxy Access Terms and Conditions

- The proxy must be the parent or legal guardian of the patient. If the requestor is not a parent or legal guardian, please call the patient's Primary Care office (see Atrius Health locations below).
- Each proxy (the adult) must have their own active MyHealth Online account; they do not need to be an Atrius Health patient.
- On the child's 13th birthday, pediatric proxy access will automatically transition to the more limited "Adolescent Proxy Access".
- Proxy access can be terminated any time on the MyHealth Online website or by written request. Atrius Health can terminate proxy access at any time, for any reason.

Please call the child's Primary Care office if you need further assistance (see Atrius Health locations below).



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## Pediatric Proxy Access and

# Adolescent with Impairment Proxy Access Authorization Form MyHealth Online Pediatric Proxy Access (under 13 years of age), or Adolescent with Impairment (13-17 years of age)

		NFORMATION d. One patient per form.		
Patient's Name:		DOB:		
Only enter address if different than Ped	iatric Proxy requestor.	Gender: 🔲 Male 🔲 Transgender		Non-Binary
Address:		Pediatrician:		
City, State, Zip:		Health Site Location:		
PARENT/LEGAL GUARDIAN'S INFORMATION Parent/Guardian is the proxy. All fields are required.				
Pediatric Proxy's Name:			DOB:	
Address:		Gender: 🛛 Male	<ul><li>Female</li><li>Other</li></ul>	Non-Binary
City, State, Zip:		Proxy's relationship to the		ardian
Telephone No:		-	0	
Pediatric Proxy's email address (required): please print clearly				
Please provide the last 4 digits of y The last 4 digits of the social security number	our Social Security #	rposes and will be stored securely in	compliance with a	pplicable laws.
Are you an Atrius Health patient? Select "Yes" only if you have seen a doctor o	Yes ANO No Tother clinician at Atrius Health (H	Harvard Vanguard, Dedham Medical	Associates, Grani	te Medical Group, or PMG).
If yes, please provide the name of	<i>your</i> clinician:			
I have read and understood the red information and agree to abide by this form and that all information I the above-named patient.	these requirements. I cert	ify that I am the parent or le	gal guardian o	f the child listed on
Date	Parent /Legal Guardian S	Signature		
Ado	elescent with Impair	ment Proxy Authoriza	tion	
In my opinion this adolescent, age 13 child will be best served by allowing a MyHealth Online proxy account.				
	Provider Name (print)			
Date	Provider Signature			



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#### **Atrius Health Site Location Information**

Please drop off or mail the completed proxy authorization form to the appropriate administrative office of the patient's/child's primary care physician's office. The form is not required if requesting Pediatric Proxy Access in person.

Visit www.atriushealth.org/locations for more location and department details. Visit myhealth.atriushealth.org/proxy for current proxy information and authorization forms.

Please call the child's primary care provider office with any questions.

Atrius Health – Dedham Attention: MyHealth Proxy Coordinator One Lyons Street Dedham MA 02026 Phone: 781-329-1400

Atrius Health – Norwood Attention: MyHealth Proxy Coordinator 1177 Providence Highway Norwood MA 02062 Phone: 781-329-1400

Atrius Health - Burlington Administration Office Attention: MyHealth Pedi Proxy Coordinator 20 Wall Street Burlington MA 01803 Phone: 781-221-25000

Atrius Health – Cambridge Administration Office Attention: MyHealth Pedi Proxy Coordinator 1611 Cambridge Street Cambridge MA 02138 Phone: 617-661-5500

Atrius Health - Chelmsford Administration Office Attention: MyHealth Pedi Proxy Coordinator 228 Billerica Road Chelmsford MA 01824 Phone: 978-250-6000

Atrius Health - Chestnut Hill/West Roxbury Administration Office Attention: MyHealth Pedi Proxy Coordinator 291 Independence Drive Chestnut Hill MA 02467 Phone: 617-541-6600

Atrius Health – Concord Administration Office Attention: MyHealth Proxy Coordinator 330 Baker Avenue Concord MA 01742 Phone: 978-287-9300

Atrius Health – Copley Administration Office Attn: MyHealth Pedi Proxy Coordinator 165 Dartmouth Street Boston MA 02116 Phone: 617-859-5000 Atrius Health – Kenmore Administration Office Attn: MyHealth Pedi Proxy Coordinator 133 Brookline Avenue Boston MA 02215 Phone: 617-421-1000

Atrius Health – Medford Administration Office Attn: MyHealth Pedi Proxy Coordinator 26 City Hall Mall Medford MA 02155 Phone: 781-306-5100

Atrius Health – Peabody Administration Office Attn: MyHealth Pedi Proxy Coordinator 2 Essex Center Drive Peabody MA 01960 Phone: 978-977-4000

Atrius Health – Quincy Administration Office Attn: MyHealth Pedi Proxy Coordinator Presidents Place - South Tower 1250 Hancock Street Quincy MA 02169 Phone: 617-774-0600

Atrius Health – Somerville Administration Office Attn: MyHealth Pedi Proxy Coordinator 40 Holland Street Somerville MA 02144 Phone: 617-629-6000

Atrius Health – Watertown Administration Office Attn: MyHealth Pedi Proxy Coordinator 485 Arsenal Street Watertown MA 02472 Phone: 617-972-51000 Atrius Health – Wellesley Administration Office Attention: MyHealth Pedi Proxy Coordinator 230 Worcester Street Wellesley MA 02481 Phone: 781-431-5400

Atrius Health – Bourne Attention: MyHealth Proxy Coordinator 2 Technology Park Drive Bourne MA 02532 Phone: 508-743-9543

Atrius Health – Plymouth Cordage Park Attention: MyHealth Proxy Coordinator 10 Cordage Park Circle Plymouth MA 02360 Phone: 508-746-2924

Atrius Health – Plymouth Court St Attention: MyHealth Proxy Coordinator 362 Court St Plymouth MA 02360 Phone: 508-746-7543

Atrius Health – Duxbury Attention: MyHealth Proxy Coordinator 20 Tremont St Duxbury MA 02360 Phone: 781-934-0172

Atrius Health – Kingston Attention: MyHealth Proxy Coordinator 214 Main St Kingston MA 02364 Phone: 781-585-2172

Atrius Health – Plymouth Long Pond Attention: MyHealth Proxy Coordinator 110 Long Pond Road Plymouth MA 02360 Phone: 508-746-5351

Atrius Health – Plymouth Pine Hills Attention: MyHealth Proxy Coordinator 3 Village Green North Plymouth MA 02360 Phone: 508-224-2224