MyChart Proxy Access Application Workflow

Audience: Any Houston Methodist team member (frontdesk/clinic managers for "Direct Proxy Assignment Workflow")

Houston Methodist MyChart allows someone other than the patient to have access to portions of the patient's health record. This is called proxy access. According to **System Policy_HIM200 Epic MyChart Proxy Access**, the adult patient or potential proxy must complete an application for access validation and establishment.

Direct Proxy Assignment Workflow

(Only for Staff and Managers Needing to Assign Proxy to Parents for their Minor Children)

ONLY applicable in this situation:

- Patient is the *biological* child of the proxy (the child's parent). If a stepparent, grandparent, aunt/uncle, adult sibling, or any other family member the application should be completed and sent to HIM for processing (see **Electronic DocuSign Workflow** below).
- Parent-child relationship is validated.
- Parent has filled out a [Proxy Application form](#) *completely*.
  - See "Paper Form Workflow" below
- The Proxy Application form is scanned into the patient's chart or faxed to Health Information Management (713.394.6475) to be scanned.

1. Open MyChart Administration
2. Open the **patient's** record.
3. Under "People Who Can Access <Patient Name>" select ⊞ **Give Proxy Access**
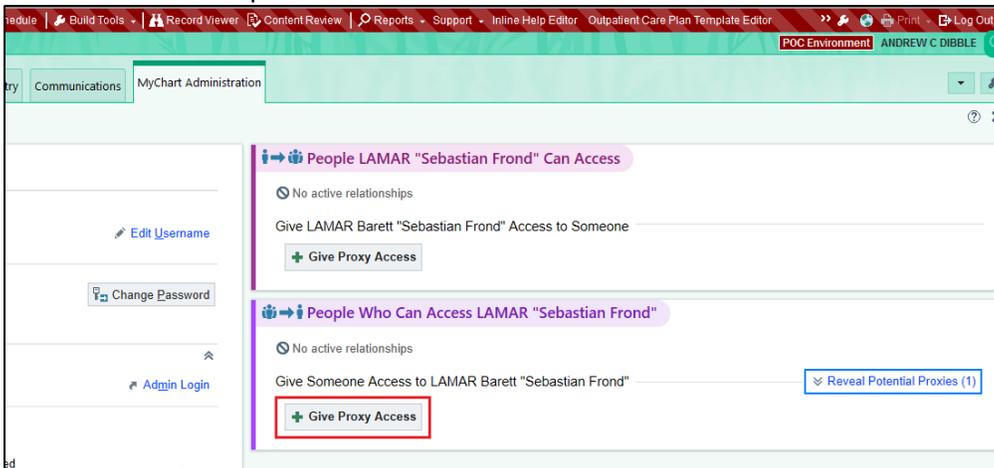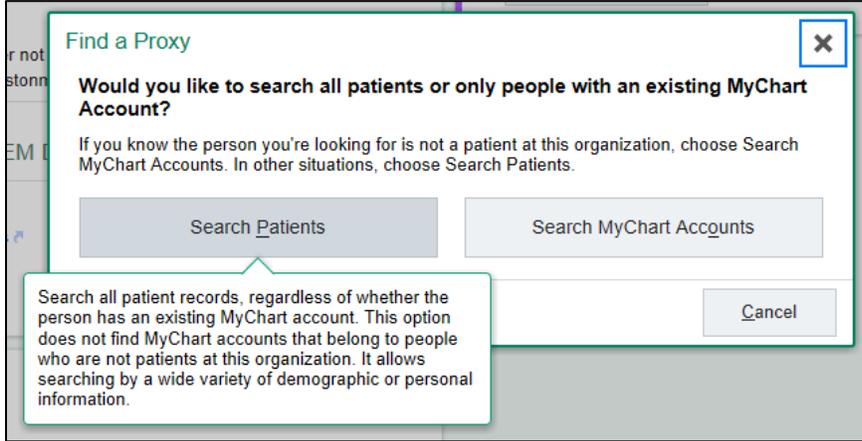

4. Choose **Search Patients.** This searches the Houston Methodist repository of patients. If you are able to locate the proxy applicant using **Search Patients**, then select the person and proceed to

step 6. If you are unable to find the proxy applicant, then proceed to step 5.


5. If you are unable to find the patient using Search Patients in step 4, then chose **Search MyChart Accounts**. If you are able to locate the proxy applicant using **Search Mychart Accounts**, then select the person and proceed to step 6. If you are unable to find a proxy MyChart account in this situation, enter proxy name, date of birth, email and phone and choose .

6. Choose **Parent accessing Child**. DO NOT choose any of the other relationships.
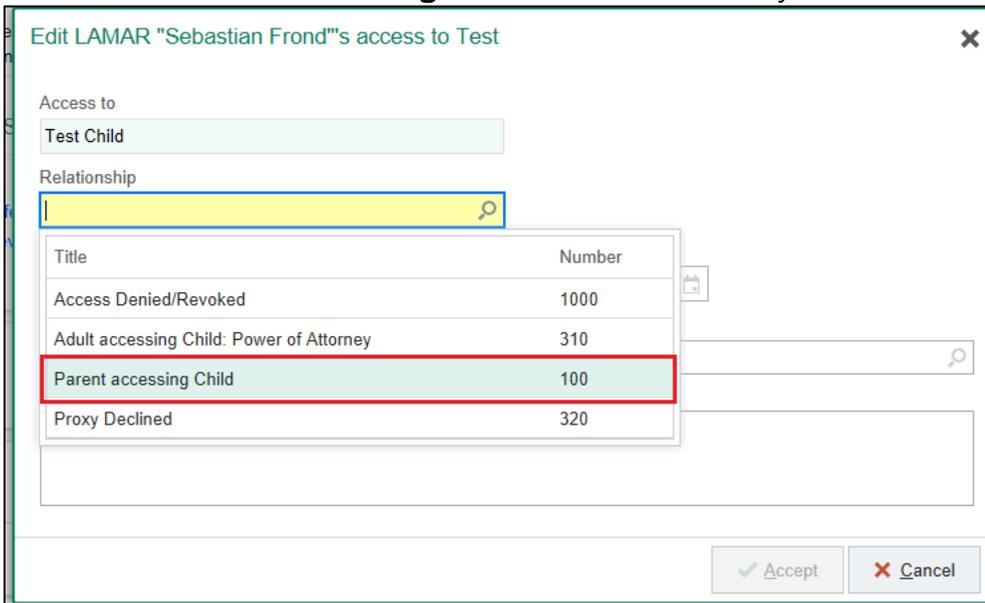
7. The fields **Access class** and **state/end date** will populate automatically. Click

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Electronic DocuSign Workflow

Any Houston Methodist team member can provide one of the scenario specefic links in a remote or in-person scenario via e-mail or through a MyChart secure paitent message. The completed/submitted forms will route automatically to the HIM team for processing.

Direct proxy applicants to the "Request proxy access" link on the homepage of MyChart: http://houstonmethodist.org/mychart

Or email them these DocuSign links:

Parent/Legal guardian/Power of attorney access:
https://na3.docusign.net/Member/PowerFormSigning.aspx?PowerFormId=48ba0761-7341-4131-a8bf-9c9fb64c8788&env=na3&acct=defbb313-54b1-4842-9baI%209-1fce6b003fba

Adult accessing adult (non-power of attorney):
https://powerforms.docusign.net/7130dd92-4f7c-42c4-98dd-2d84e170e2c8?env=na3&acct=defbb313-54b1-4842-9ba9-1fce6b003fba&accountId=defbb313-54b1-4842-9ba9-1fce6b003fba

Paper Form Workflow

Any Houston Methodist team member can provide a paper copy of this form for in-person completion.

https://mychart.houstonmethodist.org/MyChart-PROD/en-US/docs/mycproxyapp.pdf

Follow instructions as indicated on the document including completion of items 1-3. These are required to be completed for processing:

1. Proxy information including email address, phone number, and date of birth
2. Patient information including phone number and date of birth.
3. Proxy Applicant's relationship to patient with signature of patient and proxy applicant (patient signature only required for adults in non-power of attorney situations)

If the Proxy Applicant's relationship to patient aligns with items in area 4, additional documentation may be required.

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Houston Methodist MyChart® accounts are available to:
- Adult patients (18 years of age or older).
- Emancipated minors.
- Parents. Please note: on your child's 18th birthday, your proxy access to the child's Houston Methodist MyChart® account will expire automatically.

1

Name of Proxy applicant (First Middle Last): _____

Applicant's address: _____

To receive your activation code via email, please provide a valid email address: _____

Applicant's phone number: _____   Applicant's date of birth: _____

2

Name of Patient (First Middle Last): _____

Patient's phone number: _____   Patient's date of birth: _____

Proxy Applicant's relationship to patient:
☐ Spouse ☐ Parent ☐ Child over 18 years of age ☐ Primary Caregiver for Adult Patient

3

Date: _____   Signature of Patient: _____

Date: _____   Signature of Proxy Applicant: _____

4

Applicant's relationship to patient:
☐ Power of Attorney   ☐ Conservator for patient
☐ Step-parent   ☐ Guardian   ☐ Foster Parent   ☐ Other

Proxy requests for these relationships require additional documentation and review. We will contact you within 3 business days of receiving this form and we may ask you for additional documentation if necessary.

Date: _____   Signature of Proxy Applicant: _____

Upon approval of your request, you will receive a Houston Methodist MyChart® activation code along with instructions on how to sign up for Houston Methodist MyChart® and create your own Houston Methodist MyChart account. you already have a Houston Methodist MyChart account we can access ___ proxy ____

Document Submission

Houston Methodist Staff Assisted

You may accept the completed form on behalf of the patient/potential proxy and submit to the HIM team using any of the following options:

Scan into Epic: Open the _patient_ record and scan as document type: _MyChart/Healthcare Proxy_
*This workflow will generate an alert to the HIM team.

Fax: 713.394.6475
Email: hmh_requestrecords@houstonmethodist.org

Patient Initiated:

Patients may return their completed form via:

Mail: Houston Methodist Hospital
    Health Information Management Department
    6565 Fannin Street, MS St-520
    Houston, TX 77030

Fax: 713.394.6475
Email: hmh_requestrecords@houstonmethodist.org

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