



**PRACTICE MEMBER CONSENT FOR  
USE AND DISCLOSURE OF PROTECTED HEALTH INFORMATION**

**Barbara Roscus – Privacy Officer**

*NOTE: Utilization of this form is OPTIONAL AND NOT REQUIRED under the Privacy Rule.*

I hereby give my consent for MorningStar to use and disclose protected health information (PHI) about me to carry out treatment, payment, and healthcare operations (TPO).

I have the right to review the NOTICE OF PRIVACY PRACTICES prior to signing this consent. MorningStar reserves the right to revise its NOTICE OF PRIVACY PRACTICES at any time. A revised NOTICE OF PRIVACY PRACTICES may be obtained by forwarding a written request to the Privacy Officer, MorningStar Family Health Center, 4 Walter E Foran Boulevard Suite 409, Flemington, NJ 08822.

With this consent, MorningStar may mail to my home or other alternative location any items that assist the Practice in carrying out TPO, such as appointment reminders and billing statements.

With this consent, MorningStar may use electronic means of communication that assist the Practice in carrying out TPO, such as texting appointment reminders, non-urgent emails via the Passport portal, and telemedicine visits.

I have the right to request that MorningStar restrict how it uses or discloses my PHI to carry out TPO; however, the Practice is not required to agree to my requested restrictions; but if it does, the Practice is bound by this agreement. By signing this form, I am consenting to MorningStar's use and disclosure of my PHI to carry out TPO.

I may revoke my consent in writing except to the extent that MorningStar has already made disclosures in reliance upon my prior consent. If I do not sign this consent, or later revoke it, this might affect the doctor's ability to adequately provide treatment to me.

Print Name: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Practice Member*

\_\_\_\_\_  
*Date*

I give my consent for MorningStar to fax lab results or other PHI to a consultant/physician's office as needed for my care.

\_\_\_\_\_  
*Signature of Practice Member*

\_\_\_\_\_  
*Date*