



“Nuggets of Knowledge from Birth to College”

17430 Campbell Rd. #115

Dallas, Texas 75252

972-816-3100 (o)

972-863-7498 (f)

[www.richeducationalconsulting.com](http://www.richeducationalconsulting.com)

I, \_\_\_\_\_, hereby give my consent to Rich Educational Consulting, LLC, to use  
(Name of Patient or Authorized Agent)  
or disclose, for the purpose of treatment, payment, or health care operations, in the health care  
record(s) of:

\_\_\_\_\_  
Name of Patient

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Name of Patient

\_\_\_\_\_  
Date of Birth

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Name of Patient

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Name of Patient

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Name of Patient

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Date of Birth

CONSENT FORM DEFINITIONS

“Health care operations” refers to a large number of activities including:

1. Conducting quality assessment and improvement activities, including outcome evaluation and development of clinical guidelines, provided that the obtaining of generalized knowledge is not the primary purpose of any studies resulting from such activities; population-based activities relating to improving health or reducing health care costs, protocol development, case management and care

coordination, contacting of health care providers and patients with information about treatment alternatives; and related functions that do not include treatment;

2. Reviewing the competence or qualifications of health care professions, evaluating practitioner and provider performance, health plan performance, conducting training programs in which students, trainees, or practitioners in areas of health care learn under supervision to practice or improve their skills as health care providers, training of non-health care professionals, accreditation, certification, licensing, or credentialing activities;
3. Underwriting, premium rating, and other activities relating to creation, renewal or replacement of a contract of health insurance or health benefits, and ceding, securing, or placing a contract for reinsurance of risk relating to claims for health care (including stop-loss insurance and excess of loss insurance);
4. Conducting or arranging for medical review, legal services, and auditing functions, including fraud and abuse detection and compliance programs;
5. Business planning and development such as conducting cost management and planning-related analysis related to managing and operating the entity including formulary development and administration, development or improvement of methods of payment or coverage policies; and
6. Business management and general administrative activities including but not limited to: (a) management of activities relating to HIPAA privacy rule compliance; (b) customer services, including the provision of data analysis for policy holders, plan sponsors, or other customers provided that protected health information is not disclosed to such policy holder, plan sponsor, or customer, (c) resolution of internal grievances; (d) due diligence in connection with the sale or transfer of assets to a potential successor in interest, if the potential successor in interest is a covered entity or following completion of the sale or transfer, will become a covered entity; and (e) creating de-identified health information, fundraising for the benefit of the covered entity, and marketing for which an individual authorization is not required.

“Payment” means the activities undertaken by the clinician to obtain reimbursement for the provision of health care. These activities referred to in this definition relate to the individual to whom health care is provided and include but are not limited to:

1. Determination of eligibility coverage (including coordination of benefits or the determination of cost sharing amounts), and adjudication or subrogation of health benefit claims.
2. Billing, claims management, collection activities, obtaining payment under a contract for reinsurance, and related health care data processing;
3. Review of health care services with respect to medical necessity, coverage under a health plan appropriateness of care, or justification of charges;

4. Utilization review activities, including precertification and preauthorization of services, concurrent and retrospective review of services; and

5. Disclosure to consumer reporting agencies of any of the following information relating to reimbursement: name and address, date of birth, Social Security number, payment history, account number, and name and address of clinician.

“Treatment” means the provision, coordination, or management of health care and related services by one or more health care providers including the coordination or management of health care by a health care provider with a third party; consultation between health care providers relating to a patient; or the referral of a patient for health care from one health care provider or another.

“Use” means the sharing, employment, application, utilization, examination or analysis of patient information within the clinician’s practice that maintains such information.