



Phone: (952) 431-5330
Fax: (952) 431- 5334
3555 Willow Lake Blvd., Suite 290
Vadnais Heights, MN 55110

Authorization for Access to Patient Health Information

Patient Information

Full Name

Maiden or Previous Name

Date of Birth

Phone Number:

Street Address

City, State, Zip

Release Information

Authorization From:

The Remedy Mental Health

Name

3555 Willow Lake Blvd., Suite 290

Street Address

Vadnais Heights, MN 55110

City, State, Zip

(952) 431-5330

Phone Number

(952) 431-5334

Fax Number

Release Information To:

Name

Street Address

City, State, Zip

Phone Number

Fax Number

Authorization

I AUTHORIZE AND GIVE PERMISSION FOR THE ABOVE INDIVIDUAL TO:

- ☐ Discuss patient health information and care with providers and/or medical assistants.
- ☐ Request copies of all patient medical records.
- ☐ Create and change appointments.
- ☐ Discuss patient's billing information including balances, charges, insurance, and payments.
- ☐ Other (please specify): _____

This authorization **expires in one year** from the patient/patient representative date of signature unless revoked by patient/legal guardian before that time.

Return to: The Remedy Mental Health, 3555 Willow Lake Blvd, Ste. 290, Vadnais Heights, MN 55110, or Fax: 952-431-5334.

Include a copy of a valid form of ID: ☐ Driver's License ☐ Government Issued ID
☐ Military ID ☐ Passport

Patient Signature or Representative

Relationship (if other than patient) Date

2/17/2026