

**Instructions:** This form is for consent to release educational records to a Health Home for children and adolescents who have been enrolled in a Health Home. It includes information on what educational records and with whom educational records can be shared. Consent for release of educational records for children and adolescents under age 18 must be provided by the parent (see definition of parent in Question 5 below). Consent for release of educational records for those aged 18 and over must be provided by the individual.

PRINT NAME OF HEALTH HOME

PRINT NAME OF CHILD/PATIENT/CLIENT

DATE OF BIRTH

## INFORMATION SHARING - EDUCATIONAL RECORDS

### 1. What are education records?

Consistent with the Family Educational Rights and Privacy Act (FERPA) [34 CFR Part 99], educational records are those that are directly related to an infant or toddler in the Early Intervention Program (EIP) or a student and maintained by an educational agency or institution, such as an EIP provider, local early intervention official, or school that the child attended or attends.

### 2. How will the Health Home and its providers use the child's educational records?

The Health Home and its providers will use the child's educational records to assist with the coordination and management of the child's care.

### 3. What laws and rules cover the release and sharing of the child's educational records?

These laws and regulations include the federal Family Education Rights and Privacy Act of 1974 (FERPA) [34 CFR Part 99], New York's Personal Privacy Protection Law (PPPL) [Public Officer's Law §§91-99], NY Public Health Law (PHL) and regulations governing the EIP [Title IIA of Article 25 and 10 NYCRR §69-4], the Individuals with Disabilities Education Act (IDEA) [20 U.S.C. 1417 et seq.] and its implementing regulations at 34 CFR §300.610 through 300.627.

### 4. Where do the child's educational records come from?

Educational records come from any public or private EIP provider or local early intervention official or school, including a preschool, which maintains educational records for a child enrolled in a Health Home.

### 5. A parent must sign consent to share educational records for a child under the age of 18. Who qualifies as the parent?

A parent includes a natural parent, a guardian, or an individual acting as a parent in the absence of a parent or a guardian [34 CFR § 99.3]. **Parent means a birth or adoptive parent, a legally appointed guardian generally authorized to act as the child's parent or authorized to make early intervention or educational decisions for the child or a person in parental relationship [8 NYCRR§200.1(ii)][§2541(14) of PHL, 10 NYCRR§69-4.1 (ah),(ai)]. A person in parental relation to another individual shall include his father or mother, by birth or adoption, his step-father or step-mother, his legally appointed guardian, or his custodian. A person shall be regarded as the custodian of another individual if he has assumed the charge and care of such individual because the parents or legally appointed guardian of such individual have died, are imprisoned, are mentally ill, or have been committed to an institution, or because, they have abandoned or deserted such individual or are living outside the state or their whereabouts are unknown [Ed.L. § 3212]. A parent may designate another person as a person in parental relation to act in the place of the birth or adoptive parent (including a grandparent, stepparent, or other relative with whom the child resides) pursuant to title 15-A of the General Obligations Law. A parent also includes a surrogate parent who has been appointed by the early intervention official or school district to make early intervention or educational decisions on behalf of the infant/toddler or student [8 NYCRR §200.5(n)][10 NYCRR 69-4.16(d)]. A parent does not include the State if the infant/toddler or student is a ward of the State [8 NYCRR §200.1(ii)(1)][10 NYCRR 69-4.16].**

### 6. Can the Health Home redisclose the child's educational records?

No. FERPA only allows for redisclosure upon the consent of the parent [34 CFR §99.33]. If the Health Home seeks to redisclose the child's early intervention or educational records, it must first seek consent from the parent (if the child is under age 18) or the individual (if 18 and over).

## CONSENT FOR RELEASE OF EDUCATIONAL RECORDS

I understand that:

- providing consent will not impact mine or my child's (as appropriate) receipt of EIP or special education programs and services;
- regardless of my decision to provide consent, all required services in mine or my child's (as appropriate) Individualized Family Service Plan or Individualized Education Program (IEP) will be provided at no cost to me; and
- upon request, I may review copies of the records disclosed pursuant to this consent.

By signing this form, I agree that:

- \_\_\_\_\_ is enrolled in the Health Home;  
PRINT NAME OF CHILD/PATIENT/CLIENT NOTED ABOVE

- I have reviewed the above information on sharing educational records; and
- I have been fully informed of all information related to my consent for release of educational records to the Health Home.

I voluntarily give my consent for \_\_\_\_\_  
PRINT NAME OF SPECIFIC LOCAL EARLY INTERVENTION OFFICIAL, EIP PROVIDER(S), OR SCHOOL  
to release the following educational records/information about me or my child (as appropriate),

- Individualized Education Programs (IEPs);
- Individualized Family Service Plan (IFSP);
- Special Education Evaluation Reports (e.g. social history, psychological, classroom observation, other assessments that describe the physical, mental, behavioral and emotional factors that contribute to the disability);
- Early Intervention Multidisciplinary evaluations and assessments, including core and supplemental assessments and other assessments that describe the child's physical, cognitive, communication, social emotional, and adaptive development and/or diagnosed physical or mental condition with a high probability of resulting in developmental delay);
- Voluntary Family Assessment if completed as part of the EIP multidisciplinary evaluation;
- Other, specify:  
\_\_\_\_\_  
\_\_\_\_\_

I voluntarily consent to releasing the records checked above to:

\_\_\_\_\_  
NAME OF HEALTH HOME

\_\_\_\_\_  
NAME OF HEALTH HOME CARE MANAGEMENT AGENCY

\_\_\_\_\_  
NAME OF PHYSICIAN

\_\_\_\_\_  
OTHER

\_\_\_\_\_  
OTHER

I understand that:

- I may withdraw this consent at any time by signing the Health Home Consent/Withdrawal of Release of Educational Records form (DOH-5204);
- if I revoke consent it does not negate an action that occurred after my consent was given and before my consent was revoked; and
- my consent shall remain in effect until it is revoked in writing.

**For children under age 18:**

**For individuals aged 18 and over:**

\_\_\_\_\_  
PRINT NAME OF CHILD'S PARENT

\_\_\_\_\_  
PRINT NAME OF CHILD/PATIENT/CLIENT

\_\_\_\_\_  
SIGNATURE OF CHILD'S PARENT

\_\_\_\_\_  
SIGNATURE OF CHILD/PATIENT/CLIENT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
DATE

Do you authorize the EIP local early intervention official and EIP provider(s) or school to transmit protected educational records via encrypted (secure) e-mail to the Health Home? (Check box)

- Yes
- No