

**SOUTHERN HIGHLANDS COMMUNITY MENTAL HEALTH CENTER**  
**POLICY AND PROCEDURE MANUAL**

**Date of Issue: 4/1/03**

**Section Number 521**

**Date Revised: 11/7/2018**

**Policy 521 – Individual’s Right to Amendment of PHI**

**I. PURPOSE**

Southern Highlands Community Mental Health Center, in an effort to be compliant with the Privacy Rules of HIPAA’s Administrative Simplification provisions, sets out, in this policy, the process for providing consumers with an opportunity to amend their PHI that is maintained in a designated record set.

**II. POLICY**

Southern Highlands Community Mental Health Center will consider all requests from consumers, or former consumers, to amend their PHI that is maintained in a designated record set for as long as we maintain it. We will require that all requests for amendment be in writing and preferably be prepared using the Request for Amendment form. In any case, where our form cannot be obtained, we will provide the consumer, or former consumer, with the information they need to submit in lieu of the form. We will require that the consumer inform us, in writing, as to the reason for the amendment. We will notify our consumers of our policies for requesting amendments in our Privacy Notice.

We will respond to requests for amendment within 30 days from the date of the request. Should we, in rare circumstances, be unable to respond within 30 days, we will notify the consumer in writing prior to the expiration of the 30 day period and provide them with the reason that we need additional time and give them the date (no more than 30 days beyond the original 60 days) by which we expect to complete action on their request.

**III. PROCEDURE**

- A. Consumers who wish to amend any of the PHI held by the organization should be directed to make the request in writing, preferably using the Request for Medical Record Amendment form attached to this policy.
  - 1. If necessary, the consumer should be assisted by SHCMHC record room staff in completing the form.

2. Consumers should be directed to send all completed forms via the United States Post Office, other private mail delivery system, or hand deliver to the Privacy Officer.
- B. The Privacy Office should log all Request for Medical Record Amendment forms into a database that includes the date of the request, the date received, name of consumer, and primary provider.
- C. The Privacy Officer should then contact the current primary provider and notify them of the request and the content of the request.
1. The Privacy Officer should, in discussion with the primary provider, determine:
    - a. Who should be involved in the decision about the amendment, e.g., the clinical supervisor, clinical director, agency counsel, etc.
    - b. A reasonable time frame for requesting that the above individuals give their input as to whether or not the amendment should be approved or denied.
    - c. The above decisions should be based on the significance of the amendment being requested, the use of the PHI both internally and externally, and the impact of the amendment on the consumer. For example, a simple change in a relatively insignificant date may be able to be approved easily with very little input from others besides the primary provider and the Privacy Officer. A change in a diagnosis, however, may require the input of all internal providers, certain business associates, and others who have relied on or have used the information to guide their care of the consumer.
    - d. In all cases, the preliminary input should be received no later than 30 days from the date of the request, if possible, to allow for additional discussion and input where there is disagreement.
  2. The Privacy Officer should, with the primary provider, determine if there is a consensus on whether or not to approve the amendment.
    - a. The amendment can be denied for the following reasons:
      - 1) The record is already accurate and complete;

- 2) The information was not created by SHCMHC and the original source is not available to make the correction;
  - 3) The information is not a part of the designated record set;
  - 4) The PHI that is the subject of the proposed amendment is not available to the consumer because access is not permitted or has been denied under § 164.524 of the HIPAA Privacy Regulations. See Policy 520 – Individual’s Right to Access.
- b. If it appears that the decision cannot be made within the 30 day period required, the Privacy Officer will inform the consumer of the need for a one time 30 day extension. This notification will be made in writing, in plain language, will explain why the decision will be delayed and will give the consumer the date they can expect a decision.
3. The Privacy Officer will inform the consumer of the decision.
- a. This reply will be in plain language and it will be in writing.
  - b. If the amendment is approved, the Privacy Officer will:
    - 1) Determine how and what records are affected by the amendment and should be corrected. This includes the records of any business associates who have and/or use the amended PHI.
    - 2) Direct appropriate staff to make the corrections by either attaching the amended information directly to the PHI being amended or by creating a link to the amended information from the original information. In all cases, both the amended and original information will be sent together for any future disclosures of this PHI either internally or externally.
    - 3) Direct the primary provider to discuss with the consumer, and develop a list, of who should be informed of the amendment and obtain written agreement of the consumer to do so.
    - 4) Both the consumer and the primary provider should sign the bottom of the list as an indication that the consumer has agreed with the list.

- 5) Direct appropriate staff to make reasonable efforts to locate and inform those on the list in 3) above of the amendment. The staff should make sure that written confirmation, including a copy of the amendment, is sent to all persons on the list who could be located. If staff is not able to locate any person, they should make a notation on the Request for Amendment form. (Reasonable efforts include the following steps: (1) request that the consumer provide you with their most recent contact information for each individual and/or entity on the list; (2) confirm the contact information via telephone; (3) mail a written copy of the amendment to the confirmed addresses [amendment information cannot be delivered orally nor should it be mailed to non-confirmed addresses]; (4) if the address cannot be confirmed, notify the consumer and do not send the amendment; and (5) document that you have notified the consumer that contact information could not be confirmed by noting on the list next to the name of the individual or entity “consumer notified that address could not be confirmed” and the date, initial the note.
  - 6) Inform the consumer in writing of all actions taken.
- c. If the amendment is not approved the Privacy Officer will include in the notice of denial the following information:
- 1) Written basis for the denial;
  - 2) The consumer’s right to file a written statement disagreeing with the denial. The consumer should be directed to send the statement to the Privacy Officer at the address included in the notice of denial. All denials will be placed in the record.
  - 3) The process for the consumer to file a complaint about the denial, including the name, title, and telephone number of the person or office responsible for complaints; and
  - 4) The process for filing a complaint with the Secretary of DHHS.
- D. If the consumer files a written statement of disagreement with the denial of their amendment request, the Privacy Officer will consult with both the consumer’s primary providers and the Medical or Clinical Director to determine if the agency wishes to create a rebuttal statement to the written statement of disagreement.

1. If the agency decides not to file a rebuttal statement, a copy of the request, denial, and statement of disagreement should be attached to the PHI the consumer asked to be amended and all included in any future disclosures of this PHI.
  2. If the agency decides that it will file a rebuttal statement, this statement along with the request, denial, and statement of disagreement will be included together in any future disclosures of this PHI and a copy of the rebuttal statement will also be mailed to the consumer.
- E. The Privacy Officer will be responsible for setting up a meeting with the consumer and either the Medical Director or the Clinical Director to discuss their disagreement with the denial.
1. The Medical or Clinical Director will then send a written notice to the consumer of their final decision.
  2. The notice to the consumer will include information on the process for filing a complaint with us or with the Secretary of DHHS, if the decision to deny the amendment is upheld. See Policy 531 – Complaints.

**SOUTHERN HIGHLANDS COMMUNITY MENTAL HEALTH CENTER**

**MEDICAL RECORD AMENDMENT/CORRECTION FORM**

**Request for Amendment/Correction of Health Information**

Name: \_\_\_\_\_ Consumer Number: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Entry to be Amended: \_\_\_\_\_

Type of Entry to be Amended: \_\_\_\_\_

Please explain how the entry is incorrect or incomplete: What should the entry say to be more accurate or complete?

\_\_\_\_\_  
\_\_\_\_\_

Would you like this amendment sent to anyone to whom we may have disclosed the information in the past? If so, please specify the name and address of the organization or individual.

\_\_\_\_\_  
Name Address

\_\_\_\_\_  
Signature of Consumer/Legal Representative Date

**FOR SHCMHC USE ONLY:**

Date Received: \_\_\_\_\_ Amendment has been  Accepted  Denied

If denied, check reason for denial:

- PHI was not created by this organization.
- PHI is not part of consumer's record.
- PHI is not available to the consumer for inspection as required by federal law.
- PHI is accurate and complete.

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Name of Primary Provider and Title Date

\_\_\_\_\_  
Privacy Officer?/Associate Director?? Date

Date of entry into database: \_\_\_\_\_

## **TO OUR CONSUMERS:**

You have the right to submit a Medical Record Amendment/Correction Form to be made a part of your medical record. This right does not permit you to alter or change the original record created by Southern Highlands Community Mental Health Center or Southern Highlands staff. We may deny your request to amend or correct your record.

If we have denied your requested amendment/correction, you have the right to submit a written statement (no longer than 250 words) disagreeing with the denial and your reason for disagreement. We may reasonably limit the length of your written statement and we may prepare a rebuttal to your written statement of disagreement (and provide you with a copy).

If we have denied your requested amendment/correction and you do not submit a written statement of disagreement as discussed above, you may request that we include a copy of this document with any future disclosures of the information.

Please make your request in writing, and sign and date the request.

If you believe we have failed to meet our obligations as explained in our “Notice of Privacy Practices” or our legal obligations under state or federal law, you may contact the Southern Highlands Privacy Officer regarding your complaint. You may also file a complaint with the Secretary of the U.S. Department of Health and Human Resources within 180 days of the date you know or should know of the act that is the subject of your complaint. Your complaint to the Secretary must be filed, in writing, either electronically or on paper.