Section: 100.1.7

Section Title: HIPAA Policies

Policy Name: Request for Amendment of Individual Health Information

Formerly Book: 00-01-15-25:00

Approval Authority: RBHS Chancellor

Responsible Executive: Chief Healthcare Compliance Officer

Responsible Office: RBHS Office of Ethics Compliance and Corporate Integrity

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Errors or changes? Contact: RBHS Office of Ethics Compliance and Corporate Integrity: 973-972-8093

1. Policy Statement

This policy covers the rights of patients to request an amendment of their individual health information. This policy applies to
   a) Rutgers University employees who are employed within covered entities that are a part of the Rutgers Biomedical and Health Sciences (“RBHS”), RBHS researchers as well as any independent contractors engaged by RBHS; and
   b) Any Rutgers University employees who are employed by a Rutgers school, unit or department that is a covered entity and that bills federal and/or state programs for the provision of healthcare-related goods and services, any researchers in the school, unit or department as well as any independent contractors engaged by the affected school, unit or department.
      i. For purposes of this policy, the groups and entities described in (a) and (b) above shall be referred to as “RBHS Covered Entity” or “RBHS Covered Entities.”

2. Reason for Policy

To establish guidelines for assuring that all RBHS Covered Entities that create designated record sets containing Protected Health Information (PHI) have a process to respond to patient requests for amendments of their individual health information.

3. Who Should Read This Policy

This policy shall apply to health information that is generated during provisions of health care to patients in certain patient care units, patient care centers or faculty practices as well as Human Subjects research including:
a) Covered entities and their employees who are a part of the Rutgers Biomedical and Health Sciences ("RBHS"), RBHS researchers as well as any independent contractors engaged by RBHS; and

b) Any Rutgers University covered entities and their employees who bill federal and/or state programs for the provision of healthcare-related goods and services as well as any independent contractors engaged by the affected school, unit or department.
   i. For purposes of this policy, the groups and entities described in (a) and (b) above shall be referred to as "RBHS Covered Entity" or "RBHS Covered Entities."

b) Business Associates of the RBHS Covered Entities.

d) Other University departments that assist the RBHS Covered Entities in certain activities including, but not limited to, the Office of Information Technology and the Office of the Senior Vice President and General Counsel.

4. Related Documents

A. 45 CFR 164.526, Code of Federal Regulations Title 45, Section 164, Part 526, Security and Privacy, Amendment of Protected Health Information.

B. Uses and Disclosures of Health Information With and Without an Authorization

C. Standards for Privacy of Individually Identifiable Health Information

D. Access of Individuals to Protected Health Information

5. Contacts

RBHS Office of Compliance, Ethics and Corporate Integrity: 973-972-8093

6. The Policy

100.1.7 REQUEST FOR AMENDMENT OF INDIVIDUAL HEALTH INFORMATION

Definitions

A. Protected Health Information (PHI): Protected health information means individually identifiable health information that relates to the past, present or future physical or mental health or condition of an individual, the provision of health care to an individual or the past, present or future payment for the provision of health care to an individual and identifies or could reasonably be used to identify the individual.

   1. Except as provided in paragraph two (2) of this definition that is: a) transmitted by electronic media; b) maintained in electronic media; or c) transmitted or maintained in any other form or medium


B. Designated record set - Medical or billing records about individuals maintained by or for a healthcare provider; the enrollment, payment, claims adjudication, and case or medical management record systems maintained by or for a health plan; or records used in whole or in part by or for the provider to make decisions about individuals.
Procedure

All RBHS Covered Entities must maintain a process to enable its patients to request an amendment of their individual health information held by the RBHS Covered Entity. Such requests must be made in writing and include a reason supporting the amendment.

A. Requirement:

An individual has the right to request a RBHS Covered Entity to amend his or her health information. RBHS Covered Entities should require individuals to make such requests in writing and to provide a reason to support the amendment. The RBHS Covered Entity’s Notice of Privacy Practices informs individuals in advance of such requirements. An example of a Request for Amendment or Correction of Individual Health Information form can be accessed at the RBHS Office of Ethics, Compliance and Corporate Integrity website.

B. Responsibilities:

1. The RBHS Covered Entity may deny the request if the health information that is the subject of the request meets the following conditions:
   a. It was not created by the RBHS Covered Entity, unless the originator is no longer available to act on the request.
   b. It is not part of the individual’s designated health record.
   c. It would not be accessible to the individual for the reasons under University policy, Access of Individuals to Protected Health Information.
   d. It is accurate and complete.

2. The RBHS Covered Entity must act on the individual’s request for amendment no later than sixty (60) days after receipt of the request for an amendment. The RBHS Covered Entity may have a one-time extension of up to thirty (30) days for an amendment request provided the RBHS Covered Entity gives the individual a written statement of the reason for the delay, and the date by which the amendment will be processed.

3. If the request is granted, the RBHS Covered Entity must:
   a. Insert the amendment or provide a link to the amendment at the site of the information that is the subject of the request for amendment.
   b. Inform the individual that the amendment is accepted.
   c. Obtain the individual’s identification of and, agreement to, have the RBHS Covered Entity notify the relevant persons with whom the amendment needs to be shared.
   d. Within a reasonable time frame, make reasonable efforts to provide the amendment to persons identified by the individual, and persons, including business associates, that the RBHS Covered Entity knows have the PHI that is the subject of the amendment and that may have relied on or could foreseeably rely on the information to the detriment of the individual.

4. If the RBHS Covered Entity denies the requested amendment, it must provide the individual with a timely, written denial in plain language that contains:
   a. The basis for the denial.
b. The individual’s right to submit a written statement disagreeing with the denial and how the individual may file such a statement.

c. A statement that if the individual does not submit a statement of disagreement, the individual may request that the RBHS Covered Entity provide the individual’s request for amendment and the denial with any future disclosures of PHI.

d. A description of how the individual may complain to the RBHS Covered Entity or to the Secretary of the Department of Health and Human Services (DHHS).

e. The name or title, and telephone number of the designated contact person who handles complaints for the RBHS Covered Entity.

5. The RBHS Covered Entity must permit the individual to submit to the RBHS Covered Entity a written statement disagreeing with the denial of all or part of a requested amendment and the basis of such disagreement. The RBHS Covered Entity may reasonably limit the length of a statement of disagreement.

6. The RBHS Covered Entity may prepare a written rebuttal to the individual’s statement of disagreement. Whenever such a rebuttal is prepared, the RBHS Covered Entity must provide a copy to the individual who submitted the statement of disagreement.

7. The RBHS Covered Entity must, as appropriate, identify the record of PHI that is the subject of the disputed amendment and append or otherwise link the individual’s request for an amendment, the RBHS Covered Entity’s denial of the request, the individual’s statement of disagreement, if any, and the RBHS Covered Entity’s rebuttal, if any.

8. If a statement of disagreement has been submitted by the individual, the RBHS Covered Entity must include the material appended or an accurate summary of such information with any subsequent disclosure of the PHI to which the disagreement relates.

9. If the individual has not submitted a written statement of disagreement, the RBHS Covered Entity must include the individual’s request for amendment and its denial, or an accurate summary of such information, with any subsequent disclosure of PHI only if the individual has requested such action.

10. When a subsequent disclosure is made using a standard transaction that does not permit the additional material to be included, the RBHS Covered Entity may separately transmit the material required.

11. A RBHS Covered Entity that is informed by another RBHS Covered Entity of an amendment to an individual’s PHI must amend the PHI in written or electronic form.

12. A RBHS Covered Entity must document the titles for the persons or offices responsible for receiving and processing requests for amendments.

All regulations and procedures are subject to amendment.
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