



HIPPA Privacy Rule Policies

Policies and Procedures	Policy # 10	
AMENDMENTS TO PROTECTED HEALTH INFORMATION		
APPROVED BY:	ADOPTED:	
	REVISED: 07122017	
SUPERCEDES POLICY: NEW	REVIEWED: 07122017	

Purpose

To describe the circumstances under which an individual is entitled to amend their Protected Health Information (PHI) and how LifeMed ID will assist its customers with responding to and implementing amendment requests in accordance with state and federal privacy laws, HIPAA Regulations and LifeMed ID's contracts with its customers.

Policy

It is the policy of LifeMed ID to allow amendments to be made to an individual's PHI in accordance with state and federal laws consistent with the requirements of LifeMed ID's customers contracts.

All workforce members must comply with this policy. Violations of this policy will result in disciplinary action based on the seriousness of the offense or other factors. Disciplinary action may include written warning, suspension, or termination.

Definitions

"Customer" is an entity from which LifeMed ID receives PHI subject to a Business Associate Agreement (or other written agreement with the entity) in compliance with the HIPAA Regulations and approved by LifeMed ID's legal counsel.

"Designated Record Set" means:

1. A group of records maintained by or for a Covered Entity that is:
 - a. The medical records and billing records about individuals maintained by or for a covered Health Care Provider;
 - b. The enrollment, payment, claims adjudication, and case or medical management record systems maintained by or for a Health Plan; or
 - c. Records used, in whole or in part, by or for the Covered Entity to make decisions about individuals.
2. For purposes of this definition, the term record means any item, collection, or grouping of information that includes PHI and is maintained, collected, used, or disseminated by or for a Covered Entity.





For definitions of other capitalized terms or phrases, please refer to: *HIPAA-HITECH Privacy and Security Glossary*.

Procedures

1. Individual's Right to Amend. All individuals have the right to request an amendment of their PHI or a record about the individual which is in a Designated Record Set. Only the individual or the individual's Personal Representative may request an amendment.
2. Responsibility for Amendment Determinations.
 - a. The customer's Privacy Office is responsible for granting or denying amendment requests and should notify LifeMed ID's Privacy Officer of any granted.
 - b. Any workforce member that receives a notice from a customer requesting LifeMed ID to amend an individual's PHI or assist in evaluating an amendment request will forward the notice to LifeMed ID's Privacy Officer, which will oversee responding to or handling the notice.
3. Requests from LifeMed ID's customer.
 - a. If the customer notifies LifeMed ID of a granted request for an amendment of PHI, LifeMed ID will comply with the request.
 - b. When notified that an amendment request is granted by the customer's Privacy Office, the LifeMed ID Privacy Officer will communicate, in writing, the amendment to the designated office responsible for implementing the authorized amendment.
 - c. The designated office will document the amendment as required by the customer or the customer's contract, and retain the documentation as required by the Privacy Officer.
 - d. The designated office will then notify the LifeMed ID Privacy Officer, who will:
 - i. Notify the customer that the change has been made,
 - ii. Inform the customer if any others, including LifeMed ID's Downstream Business Associates, have, or could foreseeably rely, on such information to the detriment of the individual.
 - e. The LifeMed ID Privacy Officer will ensure that LifeMed ID's response to requests for amendment are within required contractual or regulatory timelines.
4. Requests Made Directly to LifeMed ID If an individual or an individual's Personal Representative submits a request directly to LifeMed ID to amend their PHI:
 - a. The workforce member receiving the request or his/her supervisor will:
 - i. Notify LifeMed ID's Privacy Officer of the request,



- ii. LifeMed ID's Privacy Officer will contact the customer's Privacy Office and notify them of the request. If the customer's Privacy Office grants the request, the LifeMed ID Privacy Officer will oversee implementing the necessary procedures to comply with the granted request as described above.
5. Documentation. The designated office will document the information about the handling of the request for amendment in the individual's record as required by the customer or the customer's contract, and in accordance with LifeMed ID's internal policies and procedures. The LifeMed ID Privacy Officer will ensure that documentation associated with a request for amendment of PHI that has been granted includes:
 - a. The Designated Record Sets that are subject to amendment,
 - b. The titles of the persons or offices at your customer responsible for processing requests for amendment by individuals,
 - c. The titles of persons and office at LifeMed ID responsible for receiving and implementing requests for amendments granted by your customer, and
 - d. Steps taken by LifeMed ID to accommodate a granted amendment request.

Documentation

This version of the policy, together with any forms and other documentation created or obtained in accordance with the policy, will be retained by LifeMed ID for a period of at least 6 years plus the current year from the date of creation or the date when last in effect, whichever is later.



Regulatory Authority

45 C.F.R. §164.526 Amendment of protected health information.

(a) Standard: *Right to amend.*

(1) *Right to amend.* An individual has the right to have a covered entity amend protected health information or a record about the individual in a designated record set for as long as the protected health information is maintained in the designated record set.

(2) *Denial of amendment.* A covered entity may deny an individual's request for amendment, if it determines that the protected health information or record that is the subject of the request:

- (i) Was not created by the covered entity, unless the individual provides a reasonable basis to believe that the originator of protected health information is no longer available to act on the requested amendment;
- (ii) Is not part of the designated record set;
- (iii) Would not be available for inspection under §164.524; or
- (iv) Is accurate and complete.

(b) Implementation specifications: *requests for amendment and timely action.*

(1) *Individual's request for amendment.* The covered entity must permit an individual to request that the covered entity amend the protected health information maintained in the designated record set. The covered entity may require individuals to make requests for amendment in writing and to provide a reason to support a requested amendment, provided that it informs individuals in advance of such requirements.

(2) *Timely action by the covered entity.*

(i) The covered entity must act on the individual's request for an amendment no later than 60 days after receipt of such a request, as follows.

(A) If the covered entity grants the requested amendment, in whole or in part, it must take the actions required by paragraphs (c)(1) and (2) of this section.

(B) If the covered entity denies the requested amendment, in whole or in part, it must provide the individual with a written denial, in accordance with paragraph (d)(1) of this section.

(ii) If the covered entity is unable to act on the amendment within the time required by paragraph (b)(2)(i) of this section, the covered entity may extend the time for such action by no more than 30 days, provided that:

(A) The covered entity, within the time limit set by paragraph (b)(2)(i) of this section, provides the individual with a written statement of the reasons for the delay and the date by which the covered entity will complete its action on the request; and



(B) The covered entity may have only one such extension of time for action on a request for an amendment.

(c) Implementation specifications: *Accepting the amendment. If the covered entity accepts the requested amendment, in whole or in part, the covered entity must comply with the following requirements.*

(1) Making the amendment. The covered entity must make the appropriate amendment to the protected health information or record that is the subject of the request for amendment by, at a minimum, identifying the records in the designated record set that are affected by the amendment and appending or otherwise providing a link to the location of the amendment.

(2) Informing the individual. In accordance with paragraph (b) of this section, the covered entity must timely inform the individual that the amendment is accepted and obtain the individual's identification of an agreement to have the covered entity notify the relevant persons with which the amendment needs to be shared in accordance with paragraph (c)(3) of this section.

(3) Informing others. The covered entity must make reasonable efforts to inform and provide the amendment within a reasonable time to:

(i) Persons identified by the individual as having received protected health information about the individual and needing the amendment; and

(ii) Persons, including business associates, that the covered entity knows have the protected health information that is the subject of the amendment and that may have relied, or could foreseeably rely, on such information to the detriment of the individual.

(d) Implementation specifications: *Denying the amendment. If the covered entity denies the requested amendment, in whole or in part, the covered entity must comply with the following requirements.*

(1) Denial. The covered entity must provide the individual with a timely, written denial, in accordance with paragraph (b)(2) of this section. The denial must use plain language and contain:

(i) The basis for the denial, in accordance with paragraph (a)(2) of this section;

(ii) The individual's right to submit a written statement disagreeing with the denial and how the individual may file such a statement;

(iii) A statement that, if the individual does not submit a statement of disagreement, the individual may request that the covered entity provide the individual's request for amendment and the denial with any future disclosures of the protected health information that is the subject of the amendment; and

(iv) A description of how the individual may complain to the covered entity pursuant to the complaint procedures established in §164.530(d) or to the Secretary pursuant to the procedures established in §160.306. The description must include the name, or title, and telephone number of the contact person or office designated in §164.530(a)(1)(ii).

(2) Statement of disagreement. The covered entity must permit the individual to submit to the covered entity a written statement disagreeing with the denial of all or part of a requested



amendment and the basis of such disagreement. The covered entity may reasonably limit the length of a statement of disagreement.

(3) Rebuttal statement. The covered entity may prepare a written rebuttal to the individual's statement of disagreement. Whenever such a rebuttal is prepared, the covered entity must provide a copy to the individual who submitted the statement of disagreement.

(4) Recordkeeping. The covered entity must, as appropriate, identify the record or protected health information in the designated record set that is the subject of the disputed amendment and append or otherwise link the individual's request for an amendment, the covered entity's denial of the request, the individual's statement of disagreement, if any, and the covered entity's rebuttal, if any, to the designated record set.

(5) Future disclosures.

(i) If a statement of disagreement has been submitted by the individual, the covered entity must include the material appended in accordance with paragraph (d)(4) of this section, or, at the election of the covered entity, an accurate summary of any such information, with any subsequent disclosure of the protected health information to which the disagreement relates.

(ii) If the individual has not submitted a written statement of disagreement, the 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 the protected health information only if the individual has requested such action in accordance with paragraph (d)(1)(ii) of this section.

(iii) When a subsequent disclosure described in paragraph (d)(5)(i) or (ii) of this section is made using a standard transaction under part 162 of this subchapter that does not permit the additional material to be included with the disclosure, the covered entity may separately transmit the material required by paragraph (d)(5)(i) or (ii) of this section, as applicable, to the recipient of the standard transaction.

(e) Implementation specification: *Actions on notices of amendment. A covered entity that is informed by another covered entity of an amendment to an individual's protected health information, in accordance with paragraph (c)(3) of this section, must amend the protected health information in designated record sets as provided by paragraph (c)(1) of this section.*

(f) Implementation specification: *Documentation. A covered entity must document the titles of the persons or offices responsible for receiving and processing requests for amendments by individuals and retain the documentation as required by §164.530(j).*



References

External

1. Omnibus Final Rule: <http://www.ecfr.gov/cgi-bin/text-idx?c=ecfr&SID=a1031c979126e6440b522063b7bba578&rgn=div5&view=text&node=45:1.0.1.3.78&idno=45%20>