

**Polk County Wisconsin
CLIENT'S RIGHT TO REQUEST AMENDMENT OR CORRECTIONS OF
PROTECTED HEALTH INFORMATION**

Policy 601.F

Effective Date: April 15, 2003

Current Revision Date:

Policy

It is the policy of Polk County to honor a Client's right to request an amendment or correction to their protected health information if they feel that the information is incomplete or inaccurate.¹ The Client has the right to request an amendment of their protected health information for as long as that information is maintained in the designated record set.

Procedures

1. Client requests for amendment or corrections of protected health information shall be made in writing to a designated Polk County employee and clearly identify the information to be amended, as well as the reasons for the amendment. These requirements are detailed in the Notice of Privacy Practices.
2. Requests may be denied if the material requested to be amended or corrected:
 - was not created by Polk County.
 - is not part of the individual's health record.
 - is not accessible to the individual because federal and state law do not permit it.
 - is accurate and complete.
3. Polk County must act on the individual's request for amendment or correction no later than 60 days after receipt of the amendment. Polk County may have a one-time extension of 30 days for processing the amendment if the individual is given a written statement of the reason for the delay, and the date by which the amendment request will be processed.

¹ In compliance with the Privacy Rule of the Administrative Simplification provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), providers must have in place and implemented policies and procedures to ensure the Clients' right to access and amend protected health information in the designated record set (§164.524 and 164.526).

Amendment Request is Granted

4. If the request is **granted**, after review and approval by the individual responsible for the entry to be amended or corrected, Polk County 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 Polk County 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 Polk County knows have the protected health information 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.

Amendment Request is Denied

5. If the request is **denied**, Polk County must provide the individual with a timely, written denial in plain language that contains:
 - a. The basis for the denial (see #2 above);
 - 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 Polk County provide the individual's request for amendment and the denial with any future disclosures of the protected health information that was the subject of the request.
 - d. A description of how the individual may complain to Polk County or the Secretary of Health and Human Services; and
 - e. The name or title, and the telephone number of the Human Resources Manager who handles complaints for Polk County.
6. Polk County must permit the individual to submit to Polk County a written statement disagreeing with the denial of all or part of a requested amendment and the basis of such disagreement. Polk County may reasonably limit the length of a statement of disagreement.
7. Polk County may prepare a written rebuttal to the individual's statement of disagreement. Whenever such a rebuttal is prepared, Polk County must provide a copy to the individual who submitted the statement of disagreement.

8. Polk County must, as appropriate, identify the record of protected health information that is the subject of the disputed amendment and append or otherwise link the individual's request for amendment, Polk County's denial of the request, the individual's statement of disagreement, if any, and Polk County's rebuttal, if any.
9. If the statement of disagreement has been submitted by the individual, Polk County must include the material appended or an accurate summary of such information with any subsequent disclosure of the protected health information to which the disagreement relates.
10. If the individual has not submitted a written statement of disagreement, Polk County must include the individual's request for amendment and its denial, or an accurate summary of such information, with any subsequent disclosure of protected health information only if the individual has requested such action.
11. When a subsequent disclosure is made using a standard transaction that does not permit the additional material to be included, Polk County must separately transmit the material required.

Additional Considerations of Amendments from Other Covered Entities

12. A covered entity that is informed by another covered entity of an amendment to an individual's protected health information must amend the protected health information in written or electronic form.
13. Polk County must document the titles for the persons or offices responsible for receiving and processing requests for amendments.
14. When a provider receives notification from another health care provider or health plan that a Client's protected health information has been amended, the receiving provider:
 - a. Must ensure that the amendment is appended to the Client's health record; and
 - b. Will inform its business associates that may use or rely on the Client's protected health information of the amendment (as agreed to in the business associate contract) so that they may make the necessary revisions based on the amendment.

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References

- “Checklist of Individual Rights Under HIPAA,” Report on Medicare Compliance, April 25, 2002
- AHIMA Practice Brief: Client Access and Amendment to Health Records, 2002
- “Processing and Implementing Clients’ Requests to Amend Their PHI,” HIPAA Privacy Staff Trainer, October, 2001
- 2002 WEDI – SNIP Security and Privacy Workgroup Privacy Policies and Procedures
- Reinhart, Boerner, Van Deuren, Attorneys at Law
- Medical Records Briefing, June 2001
- WHIMA Legal Resources Manual, Revised 2000 – WI Statute 51.30

Attachments to Policy

- Request for Amendment Form
- Sample Amendment Letters

Preemption Issues: WI Statute 51.30 (4)(f) covering mental health and substance Clients allows a Client, parent, guardian or person in the place of a parent of a minor, or the guardian of an incompetent to challenge the accuracy, completeness, timeliness or relevance of factual information in his or her record.²

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² WI Statute 51.30 (4)(f) requires that the request be made in writing to the director of the facility and a determination as to whether it will be granted or denied be made in 30 days. If the request is denied, it must be made in writing, be given to the Client, include the reason for denial; the Client must be informed of any applicable grievance procedure or court review process.