

Guam Behavioral Health and Wellness Center

TITLE: Request for Amendment of Protected Health Information

POLICY NO.:
AD-MR -17

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APPLICABILITY: Medical Records Unit

APPROVED BY: 
THERESA C. ARRIOLA, DIRECTOR

DATE OF ORIGINAL APPROVAL: 6/13/12

DATE REVISED/REVIEWED:


PURPOSE:

To establish guidelines and procedures in compliance with 45 CFR §164.526 Amendment of Protected Health Information.

POLICY:

- A. GBHWC upholds the consumer's right to request an amendment of their protected health information (PHI) if they feel that the information is incomplete or inaccurate for as long as that information is maintained in the designated record set. However, GBHWC may deny a request for amendment if the information to be amended fall under the requirements of denial as stipulated in 45 CFR §164.526 (a) 2. The **amended request may be denied** if the information;
1. Was not created by GBHWC, unless the originator/creator of protected health information is no longer available to act on the requested amendment and the mistake in the record is apparent.
 2. Is not part of the designated record set;
 3. Is accurate and complete; or
 4. The consumer does not have the right to access the record under under 45 CFR § 164.524 a(1)(2) and as follows:
 - i. Psychotherapy notes; or
 - ii. Information compiled in reasonable anticipation of, or for use in, a civil, criminal, or administrative action or proceeding; or
 - iii. PHI of an inmate under the Criminal Justice Program and obtaining such copy would jeopardize the health, safety, security, custody, or rehabilitation of the consumer or of other inmates, or the safety of any officer, employee, or other person at the correctional institution; or
 - iv. A consumer's access may be denied if the protected health information was obtained from someone other than a health care provider under a promise of confidentiality and the access requested would be reasonably likely to reveal the source of the information.
- B. All request for amendment of protected health information shall be made in writing as stipulated in the Notice of Privacy Act using *F-AD-MR Request for Amendment of PHI*.
- C. The GBHWC Medical Records Unit (MRU) will be responsible for processing and timely action of all consumer request for amendments in accordance with 45 CFR §164.526 (b)(2):
1. MRU must act on the consumer's request for amendment no later than 60 days after receipt of the request.
 2. MRU may extend the processing for another 30 days if it is unable to act on the amendment within the 60 day- time frame. A written statement of the reason for the delay, and the date by which the amendment request will be completed shall be given to the requesting consumer.

DEFINITIONS:

Protected Health Information	Information that can be linked to a particular person (example, is person-identifiable) that are collected in the course of providing health care services.
Designated Record Set	The medical records about the individual maintained by or for GBHWC or records used, in whole or in part, by or for GBHWC to make decisions about individuals/patients. Psychotherapy Notes are not a part of the GBHWCs designated record set.
Legal Health Record	Documentation of patients' health information created by GBHWC to serve as the business record documenting the care provided and is made available upon compliant request from patient and others. The Legal Health Record does not include billing records.

PROCEDURES

1. MRU staff or the lead provider shall assist consumer in completing the FAD MR-17.1 Request for Amendment Form clearly identifying the information to be amended and the reasons for the amendment.
2. Completed Request for Amendment form shall be submitted to MRU. MRU shall inform the requestor of the 60 days processing time and other relevant information regarding the amendment process.
3. MRU supervisor shall review the application for amendment and route it to the appropriate staff for review and disposition within 5 business days.
4. The author of the record in question shall make the determination to either accept or deny the request and make the appropriate response within 60 days of receiving the request.
5. Once it is determined that the request is valid and accepted, the author of the record in question should make the amendments in the electronic health record following AD-MR-08 Entries and Amendments to the Medical Record policy within 10 business days of the determination that the request is valid and accepted.
6. **If the request is accepted MRU staff shall:**
 - a. Inform the consumer that the amendment is accepted
 - b. Obtain the consumer's agreement to have GBHWC MRU notify the relevant persons with whom the amendment needs to be shared.
 - c. GBHWC shall provide the amendment to relevant persons identified by the consumer including business associates that GBHWC knows to have a copy of the record or PHI that is the subject of the amendment.
7. **If the request is denied**, MRU staff must provide the consumer with a denial letter using FAD-MR-17.2 that contains the following in plain language:
 - a. The basis for the denial,
 - b. The consumer's right to submit a written statement disagreeing with the denial and how the consumer may file such a statement,
 - c. A statement that, if the consumer does not submit a statement of disagreement, the consumer may request that the GBHWC provide the consumer'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 consumer may file a complaint with the GBHWC and
 - e. The name or title, and the telephone number of the designated contact person who handles complaints for the GBHWC.
8. GBHWC MRU in collaboration with the clinical team or Lead provider shall respond to the consumer's statement of disagreement in a form of a written rebuttal.
 9. All documents related to the request for amendment (i.e., consumer's request for amendment, the GBHWC's denial of the request, the consumer's statement of disagreement, if any, and the GBHWC's rebuttal, if any) shall be attached or linked to the record of the PHI that is the subject of the disputed amendment.
 10. Any subsequent disclosure of the PHI that is the subject of the amendment shall include the documents attached or linked or an accurate summary of such information.
 - a. When a subsequent disclosure is made using a standard transaction that does not permit the additional material to be included, the GBHWC must separately transmit the material required.
 11. Consumers who are also employees of GBHWC requesting an amendment to their PHI are required to follow the same formal process. Employees are prohibited to amend their own PHI.

SUPERSEDES:

Amendment of Protected Health Information Protocol; 6/13/2012; Wilfred Aflague, Director

REFERENCE(S):

45 CFR §164.526 Amendment of Protected Health Information.

RELATED POLICY (IES):

AD-MR-08 Entries and Amendments to the Medical Record



GUAM BEHAVIORAL HEALTH & WELLNESS CENTER

790 Gov. Carlos G. Camacho Rd. Tamuning, Guam 96913
TEL: (671) 647-5330 FAX: (671) 649-6948

REQUEST FOR CORRECTION/AMENDMENT OF PROTECTED HEALTH INFORMATION

PATIENT NAME	DATE OF BIRTH	PATIENT RECORD NUMBER
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PATIENT ADDRESS

DATE OF ENTRY TO BE CORRECTED/AMENDED	INFORMATION TO BE CORRECTED/AMENDED
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Please explain how the entry is incorrect or incomplete. What should the entry say to be more accurate or complete? Use additional sheets if needed and attach to this form.

If you agree, GBHWC will make a reasonable effort to provide the amendment to other persons who GBHWC knows received the information in the past and who may have relied, or are likely to rely, on such information in a manner that maybe detrimental to your health care.

I agree to allow GBHWC to release any amended information to individuals or entities as described above.

Would you like this amendment sent to anyone else who received the information in the past? Yes No

If yes, please specify the name and address of the organization(s) or individual(s).

SIGNATURE OF PATIENT OR PERSONAL REPRESENTATIVE <i>(If Personal Representative, state relationship to patient)</i>	DATE
SIGNATURE OF WITNESS <i>(If signature of patient is a thumbprint or mark)</i>	DATE

FOR GBHWC USE ONLY

DATE RECEIVED	AMENDMENT HAS BEEN <input type="checkbox"/> Accepted <input type="checkbox"/> Denied
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IF DENIED, CHECK REASON FOR DENIAL	<input type="checkbox"/> PHI is not part of the patient's designated record set	<input type="checkbox"/> Record is not available to the patient for inspection under Federal law
	<input type="checkbox"/> GBHWC did not create record	<input type="checkbox"/> Record is accurate and complete

COMMENTS OF HEALTHCARE PROVIDER *(If applicable)*

SIGNATURE OF HEALTHCARE PROVIDER <i>(If applicable)</i>	TITLE	DATE
SIGNATURE OF MEDICAL RECORD SUPERVISOR		DATE

Instructions for Completing GBHWC Form _____
Request for Correction/Amendment of Protected Health Information (PHI)

1. Print legibly in all fields using dark permanent ink.
2. Sign and date the request.
3. Submit the completed and signed form to the Medical Records Unit or your Lead Provider.
4. A photocopy of your completed form will be provided to you as an acknowledgement of receipt.
5. You will be notified of the acceptance or denial of your request within 60 calendar days.
6. If your request to amend is accepted:
 - a. GBHWC is required by law to notify any previous recipient of the record in question of the corrective action taken, if GBHWC made an accounting of such disclosure.
 - b. Regardless of your citizenship status, GBHWC will make reasonable efforts to send any amended or corrected information to anyone who GBHWC knows received this information in the past and who may have relied, or is likely to rely, on such information to your detriment.
 - c. GBHWC will make reasonable efforts to send the correction or amendment to those individuals or entities/organizations you identify and who have a need for the correction or amendment.
7. If your request is denied, you may do the following:
 - a. Submit to the Medical Records Unit a one-page written statement disagreeing with the denial and the basis of such disagreement.
 - b. If you do not submit a statement of disagreement, you may request that GBHWC provide this request for correction or amendment (or summary) and the denial with any future disclosures.
 - c. GBHWC has the right to prepare a written rebuttal to any statement of disagreement. You will be provided a copy of any rebuttal statement. Any written rebuttal prepared by GBHWC is not subject to correction or amendment.
8. If your request is denied, you may do the following:
 - a. Appeal the refusal to correct or amend the requested information to the Medical Records or Lead Provider.
 - b. In the event your appeal is ultimately denied, or if you elect not to appeal, you may submit a statement of disagreement or request as described in 7(a) and 7(b) above.
 - c. GBHWC has the right to prepare a written rebuttal to any statement of disagreement. You will be provided a copy of any rebuttal statement. Any written rebuttal prepared by GBHWC is not subject to correction or amendment.
 - d. In addition, if your appeal is denied, you may seek judicial review of the decision.
9. If you have a complaint about GBHWC's policies and procedures regarding your health information, you may file such a complaint with GBHWC.
10. This form and subsequent information pertaining to this request will become part of your permanent health record.



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DENIAL OF REQUEST TO AMEND PROTECTED HEALTH INFORMATION

Consumer Name: _____ Date of Birth: _____

Phone Number: _____ Address: _____

Date of Amendment Request Form _____ Date of this Denial Form _____

Your request to amend has been denied because the Protected Health Information (PHI) or the Medical Record/AWARDS that was the subject of the request:

- Was not created by GBHWC
- Is not part of the Designated Record Set (i.e., the Medical Records and or the Electronic Health Record.
- Is accurate and complete
- Would not be available for your inspection under the 45 CFR § 164.524 a (1)(2) and as follows:
 - i. Psychotherapy notes; or
 - ii. Information compiled for use in, a civil, criminal, or administrative action or proceeding; or
 - iii. PHI of an inmate under the Criminal Justice Program and obtaining such copy would jeopardize the health, safety, security, custody, or rehabilitation of the consumer or of other inmates, or the safety of any officer, employee, or other person at the correctional institution; or
 - iv. If the protected health information was obtained from someone other than a health care provider under a promise of confidentiality and the access requested would be reasonably likely to reveal the source of the information.

You have the right to submit a written statement disagreeing with the denial.

- Any statement of disagreement shall be submitted or mailed to Medical Records Unit at this mailing address: **790 Gov. Carlos G. Camacho Rd. Tamuning, Gu. 96913.**
- A statement of rebuttal from GBHWC, will be provided in response to your statement of disagreement.
- If you do not submit a statement of disagreement, you may ask that the *Request for Amendment form* and the *Denial of Request letter* be included with any future disclosures of PHI that is the subject of the amendment request.
- If you wish to file a complaint regarding this denial, please send a letter to Mr. Garibaldi C. Famisaran to the above mailing address or contact him at Tel. No. 671-6475308.

You also may file a written complaint with the Director, Office of Civil Rights of the U.S. Department of Health and Human Services. GBHWC will not retaliate against you if you file a complaint with us or with the Director.

Barsen Adelbai
GBHWC Medical Records Unit Supervisor
Tel. No. (671) 647-5344



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REVIEW AND ENDORSEMENT CERTIFICATION

The signatories on this document acknowledge that they have reviewed and approved the following:

Policy Title: Request for Amendment of Protected Health Information

Policy No: AD-MR-17

Initiated by: Barsen Adelbai

Date	Signature
6/20/22	

Barsen Adelbai
Management Analyst III - Medical Records Unit Supervisor

Date	Signature
6/21/22	

Dr. Davina Lujan
Medical Director

Date	Signature
6-21-2022	

Marilyn Aflague
Administrative Service Officer, Patients Affairs Business Office

Date	Signature
6/20/22	

Cydsel Victoria Toledo
Management Analyst IV, Regulatory Compliance/Quality Improvement

Date	Signature
6/22/22	

Debbie Paulino
Administrative Officer

Date	Signature
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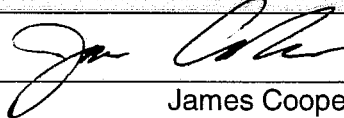
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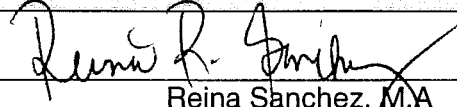
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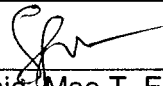
Leonora Urbano MSN, RN-BC
Nursing Administrator

Date	Signature
6/29/22	

James Cooper-Nurse, PhD
Child Adolescent Services Division Administrator

Date	Signature
6/29/2022	

Reina Sanchez, M.A
Clinical Administrator

Date	Signature
06/21/2022	

Quenie-Mae T. Fisher
GBHWC Pharmacist

Date	Signature

Carissa Pangelinan
Deputy Director