

## UNIVERSITY OF PITTSBURGH POLICY 07-02-01.3

**CATEGORY:** PERSONNEL  
**SECTION:** Confidentiality of Medical Information  
**SUBJECT:** Amendments to Protected Health Information  
**EFFECTIVE DATE:** September 23, 2013  
**PAGE(S):** 4

### I. SCOPE

To establish consistent guidelines for reviewing and processing requests for amendments to protected health information. This policy applies to all University Covered Components (the "Component" or "Components") as defined and designated in Policy 07-02-01 having protected health information (PHI).

### II. POLICY

It is the policy of the University to comply with the Health Insurance Portability and Accountability Act (HIPAA) Privacy rule, as amended, and any applicable related state laws that are not preempted by HIPAA. The HIPAA Privacy Regulations can be located at 45 CFR Parts 160 & 164 or at <http://aspe.hhs.gov/admsimp/final/PvcTxt01.htm>. As set forth in the Privacy rule, an individual may request an amendment to their PHI for as long as the PHI is kept or maintained by the Components. Terms used herein, but not otherwise defined, shall have the same meaning as those terms in 45 CFR 160.103 § 164.501.

### III. GUIDELINES

#### A. Requests for Amendment and Timely Action

1. An Individual may request an amendment to their protected health information that is maintained. The Individual will be informed that requests for amendment shall be made in writing and shall include a reason for requesting the amendment. (Please see the attached "Request to Correct/Amend Protected Health Information" form.)
2. The Component receiving the request for amendment must act on the Individual's request no later than sixty (60) days after receipt of the request.
3. If the Component is unable to act on the request within sixty (60) days after receipt, then it may extend the time period by no more than 30 days provided that:
  - a. within sixty (60) days after receipt of the request, the Component provides the Individual with a written statement explaining the reason for the delay and the date by which the request will be completed.
  - b. the Component may have only one such extension.
4. If available, and if necessary for the proper resolution of a requested amendment, the medical/dental personnel noted on the record will be consulted to the extent the amendment impacts the medical/dental record. Each Covered Component may determine whether additional individuals or groups need to review the requests.
5. Requests for amendments should be reported to the Office of General Counsel when appropriate.

## **B. Accepting the Amendment**

1. If the Component accepts the requested amendment, in whole or in part, it must:
  - a. make the appropriate amendment to the protected health information or record that is in question according to procedures defined at the Component level by, at a minimum, identifying the records that are affected by the amendment and appending or providing a link to the location of the amendment.
  - b. inform the Individual within sixty (60) days of receipt of the request for amendment (within ninety (90) days if an extension has been made) that the amendment is accepted. (Please see the attached "Request to Correct/Amend Protected Health Information" form.) The Component must also obtain the Individual's identification of, and agreement to, have it notify the relevant persons with whom the amendment needs to be shared.
  - c. make reasonable efforts to inform and provide the amendment within a reasonable time to:
    - persons identified by the Individual as having received protected health information about the Individual needing the amendment; and
    - persons, including Business Associates, that the Component knows has the protected health information that is the subject of the amendment and who may have or could have relied upon such information to the detriment of the Individual.

## **C. Denying the Amendment**

1. Denial: If the University Component denies the requested amendment, in whole or in part, then the request for amendment and the denial will be forwarded to the Office of General Counsel for handling or disposition. The Component must send a written denial to the requestor within sixty (60) days of receipt of the request for amendment. (Please see the attached Amendment Denial Letter.) The denial must be in plain language and must contain:
  - a. The reason for the denial. Requests for amendments can be denied if the protected health information or record that is the subject of the request:
    - Was not created by the Component receiving the request for amendment, 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;
    - Is not part of the designated record set;
    - Would not be available for inspection under the "Release of Protected Health Information" policy, Section V(A)(3)
    - Is accurate and complete.
  - 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 Component 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

- d. A description of how the Individual may lodge a complaint. Refer to the "Complaint Management Process Pursuant to the HIPAA Privacy Rules".
2. Statement of Disagreement: The Individual is permitted to submit a written statement disagreeing with the denial of all or part of a requested amendment and the basis of the disagreement. The Component may reasonably limit the length of a statement of disagreement.
  3. Rebuttal Statement: The Component may prepare a written rebuttal to the Individual's statement of disagreement. Whenever such a rebuttal is prepared, the Component must provide a copy to the Individual who submitted the statement of disagreement.
  4. Recordkeeping: The Component must, as appropriate, identify the record or protected health information that is the subject of the disputed amendment and either append or link the Individual's request for an amendment, the Component's denial of the request, the Individual's statement of disagreement, if any, and the Component's rebuttal, if any to the record.
  5. Future Disclosures: If a statement of disagreement has been submitted by the Individual, the Component must appropriately append and release either all of the material stated under "Recordkeeping" or an accurate summary of any such information, with any subsequent disclosure of the protected health information to which the disagreement relates.
    - a. If the Individual has not submitted a written statement of disagreement, then the Component must include the Individual's request for amendment and its denial or an accurate summary of this information with any subsequent disclosure of the protected health information only if the Individual has requested that this be done.
    - b. When a subsequent disclosure is made using a standard transaction that does not permit the additional material to be included in the disclosure, the Component may transmit the amendment documentation separately to the recipient of the standard transaction.

#### **D. Documentation/Retention**

1. A Component which is informed by another facility outside the University or Component of the University of an amendment to an Individual's protected health information shall amend the Individual's information by (a) placing the additional information received in the Individual's record, (b) dating when the additional information was placed in the record and (c) making a notation in the record that an amendment exists.
2. A Component must document the job titles of the persons or offices responsible for receiving and processing requests for amendments by Individuals and retain the documentation for at least 6 years from the date of the creation of the documentation, or from the date when the documentation was last in effect, whichever is later.

**IV. RESPONSIBILITY**

It shall be the responsibility of each Component to implement these processes and procedures to meet the requirements set forth in this policy based on the Component's unique systems and processes.

**V. NON-COMPLIANCE**

An employee's failure to abide by this policy may result in disciplinary action up to and including termination of employment.

**VI. REFERENCES**

Attachment A – Request to Correct/Amend Protected Health Information

Attachment B – Amendment Denial Letter