

## **Request for Amendment of PHI Policy and Procedure**

### **POLICY:**

It is the policy of Purdue University to permit an individual or their representative to request an amendment of their protected health information and for the request to be promptly reviewed.

Purdue University is required to act on the individual's request for an amendment no later than 60 days after receipt of the request. An extension of one 30-day period is allowed, provided that within the initial 60-day period, the individual is notified in writing of the reason for the delay and the date by which action on the amendment will be completed.

Purdue is not required to agree to the amendment if the protected health information or record that is the subject of the request:

- Was not created by the covered entity and the individual has not provided a reasonable basis to believe that the originator of the protected health information is no longer available to act on the requested amendment.
- Is confidential and not available for inspection under § 164.524 of the HIPAA regulation.
- Is not part of the designated record set.
- Is accurate and complete.

*Note:* Modification of the order of CPT codes or other minor changes to facilitate the billing process are generally not considered an amendment and will not follow the HIPAA amendment procedure. The business manager or health information management supervisor for the covered component will make the determination as to whether a correction is deemed an amendment to the record.

### **PROCEDURE:**

#### ***Request for Amendment of PHI Received from an Individual***

- The form, REQUEST OF AMENDMENT OF PROTECTED HEALTH INFORMATION, should be used for all requests for modifications to an individual's health information. This form is available on the <https://www.purdue.edu/legalcounsel/HIPAA/Patient%20Rights.html> web site.
- The individual requesting the amendment will enter the information requested in Section 1 and mail or fax the form to:

The Office of Legal Counsel  
610 Purdue Mall  
West Lafayette, IN 47907  
Phone: (765) 496-9059 // FAX: (765) 496-0340

- Purdue University's Office of Legal Counsel will review and log the request. The Office of Legal Counsel will share the request with each of the HIPAA liaisons representing the covered components at Purdue specified by the requestor as requiring amendment of the record. The liaisons will assist the Office of Legal Counsel in determining whether the amendment is warranted and whether additional affected entities, including business associates, can be identified to whom Purdue has disclosed the individual's protected health information, and who may have relied or could foreseeably rely on the information to the detriment of the individual.
- The accounting of disclosures for the patient should be consulted in making this determination. The HIPAA liaisons will be assigned the responsibility for communicating an approved amendment to the affected entities and ensuring that the amendment is implemented. In general, the covered component that initially disclosed the PHI will be responsible for providing the approved amendment.
- The REQUEST OF AMENDMENT OF PROTECTED HEALTH INFORMATION, including information entered by the Office of Legal Counsel in Section 2, will be returned by the Office of Legal Counsel to the requestor at the address specified on the form, indicating whether the request for amendment is accepted or denied and if approved, listing any affected entities who will be notified of the amendment.
- If the requested amendment is approved in whole or in part, the following actions will be taken:
  - The individual is required to read the response from Purdue, sign the authorization and return the form to the Office of Legal Counsel. By signing the form, the individual will authorize the covered component to notify the affected entities with which the amendment needs to be shared.
  - When the signed form is received, the Office of Legal Counsel will send a signed copy of the request form and notification of the amendment to all affected entities that are listed on the form. All affected entities will be notified of the amendment within 21 days of receiving the signed form. The designated record set in all impacted covered components at Purdue will, at a minimum, include an appendage or link to the location of the amendment.
- If the amendment request is denied, in whole or in part, the individual has the right to send a written statement disagreeing with the denial of all or part of the requested amendment and the basis for the disagreement. The statement should be sent to the Office of Legal Counsel at the address listed at the top of the form. If the individual does not file a written statement disagreeing with the denial, they may instead send a written statement to the Office of Legal Counsel requesting that Purdue University and its employees provide the request for amendment and the denial with any future disclosures of the protected health information that is the subject of the amendment and if such a written statement is received, any future disclosures must include this information. The Office of Legal Counsel will notify the covered components if such a written statement is received, and future disclosures will need to include that information.

- The covered component may prepare a written rebuttal to the individual's statement of disagreement and a copy of this rebuttal must be provided to the individual who submitted the statement of disagreement.

### ***Request for Amendment of PHI Received from an Entity***

- Requests for amendment of PHI received from another entity should be forwarded to the Office of Legal Counsel who will review, log the request and will fill out the form: "REQUEST OF AMENDMENT OF PROTECTED HEALTH INFORMATION FROM AN ENTITY". The Office of Legal Counsel will share the request with each of the HIPAA liaisons representing Purdue covered components specified on the form. The liaisons will ensure that the amendment is applied to records in their area and assist the Office of Legal Counsel in determining whether additional affected entities, including business associates, can be identified to whom Purdue has disclosed the individual's protected health information, and who may have relied or could foreseeably rely on the information to the detriment of the individual. The accounting of disclosures for the patient should be consulted in making this determination. These affected entities will be listed on the form in Section 3.
- The "REQUEST OF AMENDMENT OF PROTECTED HEALTH INFORMATION FROM AN ENTITY", including information entered by the Office of Legal Counsel in Section 3, will be returned to the requesting entity specified in Section 1 of the form. The form will indicate that the amendment has been applied to health records at Purdue and will list any affected entities identified by Purdue to whom the information has been re-disclosed. Purdue University will expect the requesting entity, identified in Section 1 of the form, to contact the affected entities listed to request the amendment of information as appropriate.