POLICY: PATIENT RIGHT TO REQUEST COPIES OF HIS/HER MEDICAL/DENTAL/RESEARCH AND/OR BILLING RECORD (Privacy & Security of Protected Health Information (PHI))

PURPOSE:
To allow patients, or their authorized representatives, the right to request copies of records of their health information as outlined in the designated record set (defined as the patient’s medical record, dental record, research record and any billing records maintained by or for UConn Health to make decisions about these individuals).

SCOPE:
All UConn Health staff involved in the care of patients as well as staff in areas managing billing of patient care services will comply with this policy and procedure.

POLICY STATEMENT:
UConn Health is committed to safeguarding PHI in order to fulfill its mission to patients and to operate in a manner that is consistent with applicable federal and state laws and regulations. The original patient’s medical, dental, research, and/or billing record is the property of UConn Health and may not be removed from UConn Health’s control except by court order. This policy will ensure the patient’s right to obtain paper or electronic copies of his/her PHI. Patients and/or their authorized representatives have the right to request copies of their medical, dental, research, and/or billing record information and may request to receive this information in either paper or electronic format. Electronic format is only available for records that are maintained electronically and will be released in a format of the patient’s choosing or a machine readable electronic format as agreed upon by the patient and UConn Health.

I. COPYING OF RECORDS:
   A. Authorization To Obtain Copies (Medical/Dental Records):

       1. Circumstances where written authorization is NOT needed:
           a. When in the judgment of the practitioner it is determined that a release of select medical/dental/research record information directly to the patient is necessary to meet urgent patient care needs, the patient may be given copies of the following without written authorization:
               i. Lab or diagnostic study results ordered within the clinical setting providing the release.
ii. Signed Handwritten or dictated notes (which may include H & P’s and or letters of correspondence) only as related to the care received in the clinical setting providing the release.

b. Medical/dental/research/billing records may never be released directly from practitioners or staff to persons other than the patient without the patient or authorized representative’s written authorization. For example: to insurance companies or attorneys.

2. Circumstances where a written authorization is needed:
   a. Any release of medical/dental/research information that is routine, non-urgent, that may include information from multiple UConn Health locations and/or include large volumes of information requires the patient complete the form titled “Authorization to Obtain and/or Disclose Health Information” Form HCH 551.
   b. All copies released of full or large portions of the medical record will be handled by the Release of Information Department. This assures that the patient completes the proper paperwork and obtains only the requested documents.
   c. Copies from the dental records areas of UConn Health are handled directly by those areas once the “Authorization to Obtain and/or Disclose Health Information” Form HCH 551 is completed.
   d. Copies of research records are handled directly by the Principal Investigator or his/her designee.
   e. Patient representatives have the right to act on the behalf of the patient when this is a court appointed status, or when they have the written authorization of the patient should the patient not be able to act on their own behalf. Please refer to UConn Health Policy # 2003–16 “Authorization for Release of Information” for guidance on completing the authorization form.
   f. UConn Health must act upon a patient request to copy their medical/dental/billing record information within thirty (30) days by either supplying the information or providing written notification of denial.
   g. Inpatients or their authorized representatives requesting copies should be encouraged to wait until discharge and, when possible, until the record has been completed.
   h. Patients insisting on copying their record during the current episode of care may be allowed to do so after the patient’s provider or designee, or in the case of research records the Principal Investigator or designee, has been notified of the request and approves. Copies should only include the complete and final records, i.e. final notes or lab results, not those in draft or un-reviewed form.
   i. In the case of any Psychiatric Records, releases of copies of the record may only be done after review by the treating physician or provider. This assures that the provider has determined, in the exercise of professional judgment, that obtaining a copy is NOT likely to endanger the life or physical safety of the patient or of another person.
   j. UConn Health may charge a fee as allowable by State law or the HITECH Rule for copies of records provided to patients.
B. Management Of Requests To Copy Billing Records:

1. If a person other than the patient or guarantor requests a copy of the billing record the “Authorization to Obtain and/or Disclose Health Information” Form HCH 551 must be completed and signed by the patient.

2. If the patient him/herself or guarantor requests a copy of the billing record it may be given directly to the requestor.

II. INFORMATION THAT IS NOT AVAILABLE TO BE COPIED AND RELEASED:

The following information is not available to be copied or released:

A. Psychotherapy notes recorded by a mental health professional, in any medium, and maintained separately from the rest of the patient’s medical record. Psychotherapy notes document or analyze conversation during a private, joint, family or group counseling session. By definition psychotherapy notes do not include medication records, counseling start and stop times, treatment records, results of clinical tests, diagnoses, functional status, symptoms, prognosis and progress and notes maintained with the individual’s regular health record.

B. Research labs that are exempt from Clinical Laboratory Improvement Amendments of 1988 (CLIA) may deny patients access to health information.

C. Information compiled in reasonable anticipation of or for use in a civil, criminal or administrative action or proceeding or pending litigation. Incident reports generated when a medical error occurs are not included in the designated record set and thus requests to copy this information by the patient or their representative will be denied.

III. UNCONTESTABLE GROUNDS FOR DENIAL TO COPY AND RELEASE:

A. Reasons Constituting Uncontestable Grounds:

Listed below are reasons that would constitute denial for a patient to obtain a copy of their records which are not contestable by the patient or their representative:

1. The PHI is excepted from the right of access noted in Section II above.

2. The patient agreed to temporary denial of access to the research record when consenting to participate in research that includes treatment and the research is not yet complete.

3. The patient is an inmate and obtaining a copy of his/her health information would jeopardize the health, safety, security, custody or rehabilitation of him/herself or other inmates, or the safety of an officer, employee or any other person at the correctional facility or responsible for the transporting of the inmate.
4. The PHI was obtained from someone other than a healthcare provider under a promise of confidentiality, and copying and releasing it would be reasonably likely to reveal the source of the information.

B. **Action Required When Denying Access:**

1. If the patient is denied access to a copy their record information, the Health Center must provide written explanation in plain language, containing basis for denial, a statement of the individual’s rights, and instruction on how to file a complaint with the Patient Relations Department or the Secretary of the Department of Health and Human Services.

IV. **CONTESTABLE GROUNDS FOR DENIAL TO COPY AND RELEASE:**

A. **Reasons Constituting Contestable Grounds:**

Listed below are reasons that would constitute denial for a patient to obtain copies of their records which are contestable by the patient or their representative:

1. A licensed healthcare provider has determined, in the exercise of professional judgment, that obtaining a copy is reasonably likely to endanger the life or physical safety of the patient or of another person.

2. The PHI makes reference to another person who is not a healthcare provider and a licensed healthcare professional has determined that obtaining the copy requested is reasonably likely to cause substantial harm to such other person.

3. The request for obtaining a copy is made by the individual’s personal representative and a licensed healthcare professional has determined that this is reasonably likely to cause substantial harm to the individual or another person.

B. **Action Required When Denying Access:**

1. If the patient is denied the ability to obtain a copy of their record information, UConn Health must provide written explanation in plain language, containing basis for denial, a statement of the individual’s rights, and instruction on how to file a complaint with the Patient Relations Department or the Secretary of the Department of Health and Human Services.

2. The patient may request that the denial be reviewed, in which case another licensed health care professional chosen by UConn Health will review the patient’s request and the denial. The person conducting the review will be someone other than the person who denied the patient’s first request. If the denial is overturned the patient will have the right to a copy their record. If the denial is upheld the patient will be unable to obtain a copy of their records.
3. UConn Health will promptly provide written notice to the individual of the determination of the reviewing official.

References:
- American Health Information Management Association (AHIMA)
- § 164.524 Health Insurance Portability and Accountability Act of 1996
- Connecticut General Statutes Chapter 369* Sec. 20-7c and d
- Connecticut Code Title 4 Chapter 50 Sec. 4-104 and 4-105
  - Policy #2003-03 Privacy Definitions
  - Policy #2003-16 Authorization for Release of Information
- HITECH Rule Section 13405(e) as outlined 1/25/13 in § 164.524 (c) (2) (i)
- 45 CFR Part 164
- CLIA Program and HIPAA Privacy Rule; Patients’ Access to Test Reports; Final Rule; February 6, 2014

Attachments:
Authorization to Obtain and/or Disclose Health Information Form HCH 551

Elena Albini (Signed) 7/21/14
___________________________________________
Elena Albini
Director of Medical Records

Iris Mauriello (Signed) 7/16/14
___________________________________________
Iris Mauriello
Compliance Integrity/Privacy Officer

Jeffrey Geoghegan (Signed) 7/17/14
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Jeffrey Geoghegan
Interim Chief Financial Officer

Frank Torti (Signed) 8/12/14
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Frank Torti, M.D., M.P.H.
Executive Vice President for Health Affairs

Replaces Portions of Policy # 2003-17 on 04/12/11
Revised: 9/17/13, 1/14/14, 7/8/14