

Patient's Right to Access Health Information

Date: June 10, 2009

Purpose

To provide guidelines to comply with the HIPAA privacy regulation's requirement to allow patients to access their protected health information.

Policy

It is the policy of Interventional Pain Consultants (IPC) to provide patients the right to inspect and obtain a copy of their protected health information.

Definitions

Access: To inspect and obtain a copy of information in the designated record set.

Designated Record Set: Medical records and billing records that are used to make health care and payment decisions about patients.

Procedure

1. A patient may access protected health information in a designated record set for as long as the information is maintained in the designated record set.
2. IPC must act on a patient's request for access within 30 days of receiving the request. If the information is not maintained or accessible on-site, IPC must act on a patient's request for access within 60 days of receiving the request. If IPC is unable to act on a request within the time period required, it may extend the timeframe by no more than 30 days by providing the patient with a written statement outlining the reasons for the delay and the date by which action on the request will be completed.
3. IPC must provide the patient with access to the protected health information in the form or format requested by the patient. If the information is not readily producible in such a form or format, the practice must provide the information in readable hard copy.
4. IPC may provide the patient with a summary of the health information requested or an explanation of the health information if the patient agrees in advance to such a summary or explanation. IPC may charge a fee for providing a summary or explanation if the patient agrees in advance to such a fee.
5. If the patient requests a copy of the health information or agrees to a summary or explanation, IPC may impose a reasonable cost-based fee which includes the following:

- Copying (including the cost of supplies and labor);
 - Postage; and
 - Preparing an explanation or summary, if agreed to by the patient.
6. IPC may deny a patient access to health information without permitting the patient to request a review of the practice's decision in the following circumstances:
- The information contains psychotherapy notes;
 - The information was compiled in reasonable anticipation of or for use in a civil, criminal or administrative action or proceeding;
 - The information is subject to the Clinical Laboratory Improvements Amendments of 1988, 42 U.S.C. 263a, to the extent the provision of access to the patient would be prohibited by law or exempt from the Clinical Laboratory Improvements Amendments of 1988, pursuant to 42 CFR 493.3(a)(2);
 - The request is from an inmate of a correctional institution, and IPC believes that providing a copy of the health information would jeopardize the health, safety, security, custody or rehabilitation of the patient or other inmates, or would threaten the safety of any officer, employee or other person at the correctional institution;
 - The patient has agreed to the denial of access when consenting to participate in a research study that includes treatment;
 - The patient's access to the health information is contained in records that are subject to the Privacy Act, 5 U.S.C. 552a if the denial of access under the Privacy Act would meet the requirements of that law; and
 - The health information was obtained from someone other than a health care provider under a promise of confidentiality, and the access requested would be likely to reveal the source of the information.
7. IPC may deny a patient access to health information, provided that the patient is given a right to review the denials, in the following circumstances:
- A licensed health care professional has determined, in the exercise of professional judgment, that the access requested is reasonably likely to endanger the life or physical safety of the patient or another person;
 - The information makes reference to another person (unless such other is a health care provider), and a licensed health care professional has determined, in the exercise of professional judgment, that the access requested is reasonably likely to cause substantial harm to such other person; and
 - The request for access is made by the patient's personal representative, and a licensed health care professional has determined, in the exercise of professional judgment, that the provision of access to such personal representative is reasonably likely to cause substantial harm to the patient or another person.

8. If access is denied on a reviewable ground, the patient has the right to a review of the denial by a licensed health care professional who is designated by IPC to act as a reviewing official and who did not participate in the original decision to deny access.

9. If IPC denies the patient's request for access, it must provide a written denial to the patient that contains:
 - The basis for the denial;
 - A description of the patient's review rights (if applicable); and
 - A description of how the patient may complain to IPC. The description must contain the name (or title) and telephone number of the contact person.

In compliance with HIPAA privacy regulations, it is the policy of Interventional Pain Consultants to provide patients the right to obtain copies of their protected health information. Patients will be charged for medical records copies at the following rates to cover office labor, supplies, and postage fees:

- \$20 labor fee (includes first 10 pages)
- \$0.50 per page (pages 11-50)
- \$0.25 per page (pages 51-higher)
- Actual mailing costs
- \$10 rush fee if records are to be provided within two business days
- \$20 certifying fee (if certified)

**Authorization Form
for Release of Information
for Interventional Pain Consultants**

By signing this form, you are authorizing this practice to release all or part of your Private Health Information (PHI). Please read this document carefully.

The following statement describes the information to be used or disclosed:

Interventional Pain Consultants is authorized to use or disclose this information to my insurance carriers to obtain payment for medical services rendered to me or my dependants.

You have the right to revoke this authorization by submitting a written request for revocation of authorization, including the date of original authorization and other pertinent details needed for processing your request. This written revocation must be made to the Practice Manager. The Practice Manager will be unable to process your request if it is made after the PHI has already been disclosed and if sufficient details are not given about the original authorization in order to process the request. The information you authorize this practice to disclose may be subject to re-disclosure by the recipient; if so, the information may no longer be covered by your revocation.

By signing this document, you indicate that you have read and understood the information put forth and that you are authorizing the release of the PHI outlined above to the person or class of persons listed.

Signature of Patient or Authorized Representative

Date

Name of Patient (please print)

If this document was signed by a personal representative of the patient, a description of the representative's authority to act for the patient must be provided.