

# HACKETTSTOWN REGIONAL MEDICAL CENTER

## Administrative Policy & Procedure

### Request to Inspect and Copy Chart

Effective Date: July 2006

Cross Referenced:

Reviewed Date: 10/08, 6/12

Revised Date:

Policy No: HIPAA -16

Origin: Compliance Officer

Authority: Chief Operating Officer

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#### **PURPOSE:**

To outline the process for individuals to access, inspect, and/or obtain a copy of their PHI that is maintained in a designated record set.

#### **POLICY:**

HRMC will:

- Inform the individual if it requires the request for access to be in writing.
- Act on the request within 30 days after receipt of the request by :
  1. informing the individual of the acceptance of the request and provide the access requested .or
  2. providing the individual with a written denial.
- Provide the individual with access to the PHI in the form or format requested by the individual, if it is readily producible in such form or format; or, if not, in a readable hard copy form or such other form or format as agreed to by the covered entity and the individual.
- Arrange with the individual for a convenient time and place to inspect or obtain a copy of the PHI, or mail the copy of the PHI at the individual's request within the specified time period.

HRMC will impose a reasonable & cost based fee on the individual for a copy of the PHI:

- Reasonable and cost-based.
- Only for the cost of:
  1. Copying, including the cost of supplies for and labor of copying the PHI requested by the individuals;
  2. Postage, when the individual has requested the copy, or the summary or explanation, to be mailed.

HRMC identifies the PHI to which the individual does not have a right to access. The exception of an individual's right to access of their PHI includes:

1. Psychotherapy notes, which are not part of the Medical Record
2. Information that is compiled in reasonable anticipation of a lawsuit.
3. Information the release of which is prohibited by Clinical Laboratory Improvements Amendments (CLIA).
4. Information held by prisons on inmates, based on an assessment of the risks of providing access.
5. Information held by a research entity, when the individual has agreed to a temporary limitation on access.
6. Information for which access would be denied under the Privacy Act of 1974.
7. Information obtained from someone other than health care provider under a promise of confidentiality, where access would likely reveal the source.