



*Issuing Department:* Internal Audit, Compliance, and Enterprise Risk Management

*Effective/Reissue Date:* 10/5/2016  
*Current Version:* 11/1/2017

## **Right to Request an Amendment**

### **Policy**

NYU Langone is committed to maintaining accurate, clear, and complete medical and billing records and to upholding a patient's rights with respect to their health information. To this end, patients are permitted to request, in writing, that NYU Langone amend Protected Health Information ("PHI") contained in NYU Langone's Designated Record Set or in a Designated Record Set of a NYU Langone Business Associate.

This right applies only to factual statements contained in the record and not to the provider's observations, inferences, or conclusions.

The request to amend PHI may be denied if it is determined that the information recorded:

- is accurate and complete,
- was created by another provider (i.e., an external record or not originator of record),
- is no longer maintained by NYU Langone (e.g., the record has been destroyed in accordance with the *Records Management Policy*), and/or
- is not available for access by the patient (see chart reference in *Right to Inspect and Obtain PHI Policy*).

The patient may require NYU Langone to append a brief statement of disagreement prepared by the patient to the record at issue. The statement of disagreement should not exceed 500 words. The patient's statement of disagreement must be released whenever the information at issue is released. Alternatively, the patient may require NYU Langone to release the patient's request form and the denial letter whenever the information at issue is released. If the information at issue is Disclosed through an electronic transaction that does not permit inclusion of the statement of disagreement, the form, and/or denial letter, Health Information Management ("HIM") personnel or other appropriate Workforce Member must separately transmit the material.

All requests for amendment will be processed in a timely manner in accordance with NYU Langone policies and procedures.

### **Procedure**

When an adult patient, a minor who is allowed to consent to his or her own Treatment, or the parent or guardian of a minor patient believes that the health information NYU Langone

maintains in a Designated Record Set is inaccurate or incomplete, the patient may request an amendment to that information.

1. The patient must submit the request in writing, by completing a *Request to Amend Protected Health Information* form (“*Request Form*”) and submit it as follows:
  - to amend Tisch Hospital, Rusk Rehabilitation, NYU Langone Orthopedic Hospital, and other NYU Langone Hospitals site records not listed, submit to: Patient Relations Office 550 1<sup>st</sup> Ave, NY, NY 10016 (212-263-6906) or the NYU Langone Privacy Officer (One Park Ave, 3<sup>rd</sup> Floor, NY, NY 10016 (212-404-4079).
  - to amend NYU Langone Hospital-Brooklyn records, submit to: Patient Relations Office 150 55<sup>th</sup> Street, Brooklyn, NY 11220 (718-630-7314).
  - to amend Perlmutter Cancer Center records, submit to: HIM, Perlmutter Cancer Center, 160 E 34<sup>th</sup> St, 10<sup>th</sup> Floor, NY, NY 10003 (212-731-5096).
  - to amend Faculty Group Practice records, submit directly to the individual physician’s practice manager.
  - to amend Family Health Centers at NYU Langone, Lutheran Augustana, or Lutheran Certified Home Health Agency, submit to the NYU Langone Privacy Officer, One Park Ave, 3<sup>rd</sup> Floor, NY, NY 10016 (212-404-4079).
  - to amend Southwest Brooklyn Dental Practice records, submit to: 476 48<sup>th</sup> Street, 3<sup>rd</sup> Floor, Brooklyn, NY 11220 (347-377-5100).
  - for any other location or if unsure where to submit, send to Patient Relations Office, 5501<sup>st</sup> Ave, NY, NY 10016 (212-263-6906) or the NYU Langone Privacy Officer at One Park Ave, 3<sup>rd</sup> Floor, NY, NY 10016 (212-404-4079).
2. The receiving Workforce Member will date stamp the *Request Form* and acknowledge receipt within seven (7) days. If a request for amendment is part of a formal, written patient complaint, Patient Relations will acknowledge receipt.
3. The appropriate Workforce Member, in consultation with the clinician of record and the Privacy Officer as necessary, will determine whether to grant or deny the patient’s request to amend.
4. The appropriate Workforce Member must respond to the patient’s request within sixty (60) days of receipt of the *Request Form*. One thirty (30) day extension is permitted so long as the patient is notified in writing of the reason for the extension and the date the patient can expect a response.
5. NYU Langone will accept or deny the requested amendment. The determination will be made by the treating clinician or author of the subject of the amendment, in consultation with other Workforce Members, including the Privacy Officer, as necessary.
  - i. If the patient’s request to amend is granted:
    - The clinician of record will amend or correct the record that is the subject of the request, dating and signing any amendment or correction in accordance with NYU Langone policy.

- The appropriate Workforce Member will notify the patient in writing of the decision and will make reasonable efforts to provide the amendment to persons identified by the patient and to persons, including Business Associates, whom NYU Langone knows has the information that is the subject of the patient's request.
  - The amendment must be released whenever the information at issue is Disclosed. If the information is Disclosed through an electronic transaction that does not permit inclusion of the amended material, HIM personnel or the appropriate Workforce Member must separately transmit the amended material.
- ii. If the patient's request to amend is denied, in whole or in part:
- The appropriate Workforce Member will notify the patient in writing of the decision using the *Request to Amend Protected Health Information-Denied* template letter, including:
    - the ground for denial,
    - a statement of the patient's right to submit a statement of disagreement not to exceed 500 words,
    - a statement that the patient may alternatively request that NYU Langone include the patient's form and the denial letter when disclosing information to others in the future, and
    - a description of how the patient may complain to the NYU Langone Privacy Officer, the U.S. Secretary of the Department of Health and Human Services, and the New York State Department of Health (or other appropriate oversight agency).
6. NYU Langone may prepare a written rebuttal to the patient's written statement prepared by the clinician of record to be included in the patient's record and released whenever the information at issue is released. NYU Langone must provide a copy of the rebuttal statement to the patient.
7. If NYU Langone is informed, by another provider, of an amendment to a patient's record, Workforce Members, in consultation with the Privacy Officer, will make the requested amendment and will date and sign any amendment that is made in accordance with NYU Langone policy.
8. HIM, Practice Managers, and/or the clinician are responsible for ensuring that the patient's *Request Form*, denial letter, if any, rebuttal statement, if any, and NYU Langone's rebuttal statement, if any, are appended to the record and information at issue, whether in paper or electronic form (e.g., scanned into Epic) and included in any subsequent Disclosure of the information at issue.
9. Maintain all documentation required by this policy in the patient's medical record for a period of at least six (6) years.

**Related Documents**

Designated Record Sets

Request to Amend Protected Health Information-Denied template

Request to Amend Protected Health Information Form

Right to Inspect and Obtain PHI

**Legal Reference**

45 C.F.R. §164.526

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This version supersedes all previous NYU Langone (as defined in these Policies) entity HIPAA policies, including but not limited to NYU Langone Hospitals, New York University School of Medicine, and/or Lutheran Medical Center.