

Policies of the University of North Texas Health Science Center	Chapter 14 –
14.208 Patient Access to Health Information	UNT Health

Policy Statement.

A patient has a right of access to inspect and/or obtain a copy of their protected health information (PHI), that is contained within the designated record set, for as long as the protected health information is maintained in the designated record set. UNTHSC may deny a request under certain circumstances outlined in this procedure.

Application of Policy.

This policy applies to all UNTHSC providers and employees.

Definitions.

1. **Access:** means to inspect and/or obtain a copy of PHI in a designated record set.
2. **Designated Record Set:** sets of records that may be used to make decisions about the patient or their treatment and generally include the patient's medical record and billing records. This includes records maintained in an electronic format.
3. **PHI:** "protected health information" or "PHI" is individually identifiable health information that is transmitted or maintained in any form or medium, including oral, written, and electronic.

4.

Psychotherapy Notes:

means notes recorded by a mental health professional documenting the contents of conversation during a private, group, joint or family counseling session and that are separated from the rest of the individual's medical record.

Procedures and Responsibilities.

1. Requests for Access:

a. The patient may request access to or request a copy of his or her PHI as contained in the designated record set. The patient is to sign the Request for Access to Health Information form.

A. The patient has the right to direct UNTHSC to transmit the copy of the PHI directly to another person as designated by the patient. The request must be in writing, signed by the individual, clearly identify the designated individual and where to send the information.

1. Electronic documents and electronic signatures are acceptable for the request.

b. Exceptions include psychotherapy notes, information compiled in anticipation or use in a civil, criminal or administrative action or proceeding, and information subject to prohibition by the Clinical Laboratory Improvements Amendments (CLIA).

Responsible Party: UNTHSC employees

2. Providing Access:

a. UNTHSC will offer the patient a convenient time and place to inspect or obtain a copy of the record or make arrangements to mail the copy.

b. UNTHSC will produce the information in the form and format requested by the patient as

follows:

- i. If the PHI that is the subject of the request for access is electronic and if the patient requests an electronic copy of such information, UNTHSC will provide the patient with access to the PHI in the electronic form and format requested by the individual, if it is readily producible in such form and format, or if it is not, in a readable electronic form and format as agreed to by UNTHSC and the patient.
 - ii. If the patient is not requesting an electronic copy of the PHI, UNTHSC will provide the patient with access to the PHI in the form and format requested by the patient, if it is readily producible in such form and format, or, if not, in a readable hard copy form or such other form and format as agreed to by UNTHSC and the patient.
- c. UNTHSC may impose a reasonable, cost-based fee for the labor and supplies for copying the PHI.
- d. UNTHSC may provide a summary or explanation of the PHI if the patient agrees to the format and associated fee in advance.
- e. UNTHSC will provide the patient access to his or her PHI within fifteen (15) business days after receipt of request.

Responsible Party: UNTHSC employees

3. Denial of Access:

UNTHSC may deny access without providing the patient an opportunity for review in the following circumstances:

- a. A patient's access to PHI created or obtained by UNTHSC in the course of research that includes treatment may be temporarily suspended for as long as the research is in progress, provided that the patient has agreed to the denial of access when consenting to participate in the research that includes treatment, and UNTHSC has informed the patient that the right of access will be reinstated upon completion of the research.
- b. If the PHI was obtained from someone other than a health care provider under a promise of confidentiality and the access would be reasonably likely to reveal the source of the information.
- c. The PHI is excepted from the right of access as outlined in section 1 c. above.

UNTHSC may deny a patient access to the designated record set in the following circumstances, but the patient must be given the right to have the denial reviewed:

- a. 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.

- b. The PHI makes reference to another person (unless such person 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.
- c. 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 granting the access to the personal representative is reasonably likely to cause substantial harm to the patient or another person.

If the access to PHI is denied, UNTHSC will:

- a. Give the patient access to any other protected health information requested, after excluding the PHI to which access has been denied.
- b. Provide a written denial to the patient. The written denial must be stated in plain language and contain:
 - i. The basis for the denial;
 - ii. A statement of the patient's review rights and how the patient may exercise such review rights; and
 - iii. A description of how the patient may complain, including the name or title, and telephone number of the contact person for such complaints.

If the patient has requested a review of the denial-

- a. UNTHSC will promptly designate a licensed health care professional, who was not directly involved in the denial, to review the decision to deny access.
- b. The designated reviewing official must determine, within a reasonable period of time, whether or not to deny the access requested.
- c. UNTHSC must promptly provide the patient written notice of the decision made by the designated reviewing official and take other action as required to carry out that decision.

UNTHSC must document and retain for six (6) years the following:

- a. The designated record sets that are subject to access by patients; and
- b. The titles of the persons or offices responsible for receiving and processing requests for access by patients.

- II.
- III. Responsible Party: UNTHSC employees

4. Employees have a right of access to their own medical records like any other patient does; however, employees must follow the procedures outlined in this policy to obtain access to their medical records. Employees may not directly access their own medical records outside of the procedures outlined in this policy.

- IV. Responsible Party: UNTHSC employees

References and Cross-references.

45 CFR § 164.524

Texas HB 300, Section 5

Approved: September 29, 2011

Effective: September 29, 2011

Revised: June 27, 2013