
HIPAA Policy 5002**Right to Request Access and Amendment to Designated Record Set**

Responsible Office Office of the Provost
Responsible Official Privacy Officer

Effective Date April 14, 2003
Last Revision Jan 30, 2003

Scope

This policy applies to the University's Covered Components, designated as such for purposes of complying with the privacy provisions of the Health Insurance Portability and Accountability Act of 1996. The Covered Components are: (1) the Group Health Plan Component; and (2) the Covered Health Care Component, comprised of the School of Medicine, School of Nursing, Department of Psychology clinics and Yale University Health Services.

Policy Statement

In accordance with the law and relevant University procedures, individuals have the right to access and request amendment of their PHI that is maintained in their designated record set.

Reason for the Policy

To afford patients the right to inspect and obtain a copy of health information about themselves and to request amendment of their health information in the YALE UNIVERSITY (YALE) Designated Record Set.

To clarify for members of YALE workforce how patients may access their health information and when and how an amendment will be accepted.

Definitions

- [Confidential Communications](#)
- [Covered Entity](#)
- [Designated record set](#)
- [Disclosure](#)
- [Legally Authorized Representative](#)
- [PHI \(Protected Health Information\)](#)
- [TPO \(Treatment, Payment, Operations\)](#)
- [Use of Information](#)

(See [HIPAA Glossary](#) for complete list of terms)

Procedures

[5002A PR1](#) Right to Request Access and Amendment to Designated Record Set

[5002B PR1](#) Right to Request Access and Amendment to Designated Record Set

Forms and Exhibits

[5002 EX.A](#) Designated Record Set

[Form 5002](#) - Request Amendment of PHI Retained in Designated Record Set

Contacts

Subject	Contact	Phone
HIPAA Compliance	Chief HIPAA Privacy Officer	436-3650
	Deputy Privacy Officer, YSM	737-6085
	Deputy Privacy Officer, YSN	737-5700
	Deputy Privacy Officer, Psychology	436-3650
	Deputy Privacy Officer, UHS	432-0076
Information Security	University Information Security Officer	432-1248
	YSM Information Security Officer	785-5204
Research Compliance	Human Investigation Committee (YSM)	785-4688
	Human Subjects Committee (FAS)	436-3650
	Human Subjects Research Review Committee (YSN)	737-2371

Roles and Responsibilities

Office of the Provost

responsible for University compliance issues including HIPAA

Office of General Counsel

interprets HIPAA regulations; reviews and approves all HIPAA related contracts including contracts with Business Associates or for research contracts

University Information Security Officer

individual responsible for overseeing information security and ensuring compliance with security requirements of HIPAA

Chief HIPAA Privacy Officer

individual responsible for overseeing and ensuring HIPAA compliance throughout Yale University; coordinates compliance related activities through the following deputies in each of the covered schools, departments, or other entities:

- Deputy Privacy Officer, School of Medicine

- Deputy Privacy Officer, School of Nursing
- Deputy Privacy Officer, Yale Health Services
- Deputy Privacy Officer, Yale Health Plan/Benefits Office
- Deputy Privacy Officer, Department of Psychology Clinics

Procurement Office

identifies Business Associates and ensures appropriate contracts in place

Grants & Contracts Administration

Responsible for negotiating data use agreements and research related contracts.

Institutional Review Boards (HIC, HSC, HSRRC)

Responsible for review and approval of waivers of authorization for research purposes.

Revision History

The official version of this information will only be maintained in an on-line web format. Any and all printed copies of this material are dated as of the print date. Please make certain to review the material on-line prior to placing reliance on a dated printed version.
