

 <p style="text-align: center;"><b>County of Sacramento</b>  <b>Department of Health Services</b>  <b>Division of Behavioral Health Services</b>  <b>Policy and Procedure</b></p>	Policy Issuer (Unit/Program)	BHS-CMH-YDF
	Policy Number	08-05
	Effective Date	10/2009
	Revision Date	07/2017
Title: Client Right to Amend Health Information	Functional Area: Health Information Management	
Approved By:		
Matthew Quinley, LCSW Health Program Manager	Christopher Eldridge, LMFT Mental Health Program Coordinator	

**Background/Context:**

Sacramento County Juvenile Justice Institutions Mental Health Team (JJIMHT) clients or their legal representative have the right to request an amendment to their protected health information (PHI) in the designated record set, for as long as the PHI is maintained in the designated record set, if the client or legal representative believe that an item or statement in his/her mental health record is incomplete or incorrect.

**Purpose:**

The objective of this policy and procedure is to establish guidelines by which JJIMHT members will adhere to in the event a youth, or their legal representative, having received mental health services while detained in the Youth Detention Facility (YDF) requests an amendment to their PHI.

**Details:**

1. Amendment Request
  - A. Individuals requesting to amend PHI will be asked to complete the Division of Behavioral Health Services (DBHS) Amendment of Health Records Request Form (AHRRF) (Form #2094). The form notes the following:
    - I. The change(s) the individual wants to make to their health record
    - II. What they want the information to state
    - III. Reasons they want the change(s) made to the record
  - B. The JJIMHT member receiving the request shall verify the identification of the individual making the request (valid picture identification) and ensure the individual has the legal authority to do so. A copy of the identification used and any document(s) supporting the individual has the authority to make the request shall be attached to the AHRRF.
2. Evaluation and Response
  - A. The JJIMHT Program Coordinator, or another licensed mental health professional, shall review the request for approval, denial or to delay the request. A progress

note providing a detailed rationale for the approval, denial or delay of the request will be entered into the electronic mental health record (EHR).

- B. The individual making the request has a right to response within 60 days of the request for amendment. If the response is delayed, the individual will be notified in writing of the reason(s) for the delay and the date by which JJIMHT will act upon the request. Only one 30 day extension may be granted.
3. Amendment Request Granted
    - A. If the request to amend PHI is granted in whole or part, the clinician must make the appropriate amendment to the PHI or record(s) and document the amendment in the EHR. The clinician makes the appropriate amendment by identifying the records that are affected by the amendment and appending or otherwise providing a link to the location of the amendment.
    - B. The clinician must provide timely notice to the individual making the request of the amendment having been accepted and request the individual's permission to notify other relevant persons or entities with whom JJIMHT has shared or needs to share the amended information.
    - C. The individual will be requested to sign the Authorization to Obtain or Release Protected Health Information Form (Form #2099) authorizing the JJIMHT to make reasonable and timely efforts to inform and provide the amendment to:
      - I. Persons named by the individual as having received PHI and are in need of the amendment; and
      - II. Persons, including business associates, the JJIMHT know have the PHI that is the subject of the amendment and that may have relied or could foreseeably rely on the information to the detriment of the client.
  4. Amendment Request Denied
    - A. The request for amendment may be denied for the following reasons:
      - I. The original information is found to be accurate and complete
      - II. The information was not created by the JJIMHT, unless the individual provides a reasonable basis to believe that the originator of such information is no longer available to act on the requested amendment
      - III. The information is not part of the JJIMHT record(s)
      - IV. If the client was denied access to their mental health record per California State law Health and Safety Code 123.130.
    - B. If the requested amendment is denied, in whole or part, the JJIMHT clinician denying the request must:
      - I. Provide the individual with a timely written denial within the time limits specified in section 1. B of this policy and complete the Amendment Denial Notification Form (DBHS Form #3006).
      - II. State the basis for the denial in comprehensible terms.
    - C. The individual may submit a written statement of rebuttal if the requested amendment is denied. The JJIMHT clinician will enter the individual's written rebuttal statement into the medical record.
      - I. The County Children's Mental Health Medical Director reviews the individual's written rebuttal. The Medical Director may make comments

about the individual's statement of rebuttal in the progress note section of the EHR.

- II. If comments are made, the JJIMHT will send a copy of the written comments to the individual.
- III. JJIMHT will include a copy of the Medical Director's comments and the individual's written rebuttal statement, if any, with any future disclosures of the relevant information.
- IV. If the individual does not submit a written statement of disagreement, the individual may ask that if the JJIMHT makes any future disclosures of the relevant information that the JJIMHT will also include a copy of the individual's original request for amendment and a copy of the written denial.
- V. The individual shall be provided with information on how to complete and file a privacy complaint as per CMH-YDF-08-08-HIPAA Complaints and PHI/EPHI Breach Protocol.

**Reference(s)/Attachments:**

DBHS-HIPAA-AS-100-2-Client Privacy Rights

DBHS Amendment of Health Records Request (Form #2094)

DBHS Amendment Denial Notification (Form #3006)

**Related Policies:**

BHS-CMH-YDF-08-04-Documentation Guidelines

BHS-CMH-YDF-08-06-HIPAA Complaints and PHI/EPHI Breach Protocol

BHS-CMH-YDF-08-09-Release of Protected Health Information

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