



Request Form for Medical/Health Information or Request an Amendment

You have the following rights regarding information Developmental Disability Service of Jackson County, eitas maintains about you.

Right to Inspect and Copy: You have the right to inspect and copy your medical/health information *with the exception of psychotherapy notes and information compiled in anticipation of litigation*. To inspect and copy your medical/health information, you must submit your request in writing to this facility's Privacy Official or designee. The Privacy Official will respond to your request within 30 days of receipt of your written request. If you request a copy of the information, a fee may be charged for the costs of copying, mailing and/or other supplies associated with your request. The Privacy Official may deny your request to inspect and copy in certain limited circumstances. If you are denied access to your medical/health information because of a threat or harm issue, you may request that the denial be reviewed. Another licensed health care professional chosen by the facility will review your request and the denial. The person conducting the review will not be the person who denied your request. The Privacy Official will comply with the outcome of the review.

Right to Request an Amendment: If you feel that medical/health information Developmental Disability Services of Jackson County - eitas has about you is incorrect or incomplete, you may ask to have the information amended. You have the right to request an amendment for as long as the information is kept by or for the facility. Requests for an amendment must be made in writing and submitted to the Privacy Official or designee. You must provide a reason to support your request for an amendment. Your request may be denied if it is not in writing and/or it does not include a reason supporting the request or if it is not allowed by other state or federal laws and/or regulations.

Developmental Disability Services of Jackson County – eitas will respond within 60 days to a written request, but may require a 30-day extension to amend the medical/health information or deny the request. Under no circumstances will Developmental Disability Services of Jackson County – eitas exceed the 90 days in providing a response.

I, _____ hereby request a
(Please print full name)

Copy of my medical/health information

Request an Amendment

Name of Service Coordinator: _____

If you have questions please call the Privacy Official at (816) 363-2000 otherwise please mail your request to:

Privacy Official
Developmental Disability Services of Jackson County – eitas
8511 Hillcrest, Suite 300
Kansas City, MO 64138