



Heartland Health Services Medical Record Amendment Request

You have the right to request an amendment to your medical record if you believe any information contained within it is inaccurate or incomplete. Upon receipt of your request, Heartland Health Services (HHS) will review the information in question to determine whether an amendment is warranted.

Please note that simply submitting a request does not guarantee that an amendment will be approved. If, after review, the information is determined to be inaccurate or incomplete, the medical record will be amended accordingly. However, if the information is found to be accurate and complete as documented, the request for amendment will be denied.

Additionally, Heartland Health Services can only amend information that was originally entered into the medical record by an HHS employee or provider. Information originating from another healthcare organization or external provider cannot be amended by HHS. Requests to amend information from another facility must be directed to that organization.

To request an amendment to your medical information, please fill out this form **IN ITS ENTIRETY** and mail it to the following address:

Heartland Health Services
c/o Compliance Department
2214 N. University St.
Peoria, IL 61604

PATIENT INFORMATION:

Full Name (printed): _____ Date of Birth: _____
Phone Number: _____
Home Address: _____
City State Zip

Person Requesting (if not the patient): _____ Relationship to the Patient: _____

AMENDMENT ACKNOWLEDGEMENT:

After reviewing my medical record, I do not find the following information to be accurate reflect my condition/diagnosis/treatment on the following date of service(s): _____ and should be supplemented with the clarifying information in the form of an amendment to the medical record.

I, _____, understand that Heartland Health Services may or may not supplement the medical record with an amendment based on my request, and under no circumstances will HHS alter the original documentation of the medical record.

