



Frequently Asked Questions

Patient Directed Request for Protected Health Information form: Use this form for patient directed release of information requests made by a patient or a patient's representative.

Authorization for the use and disclosure of Protected Health Information form: For 3rd Party requestors.

Patient Information: Complete the entire section which identifies clearly and legibly all the demographic information specific to the patient. We encourage patients to request information 7 to 10 days prior to when they are needed for follow up visits.

Beacon sites: Identify the Beacon site which you are requesting your medical records.

Information Requested: This section gives us the instructions for what information you would like to receive or have sent. Specifying dates of treatment is helpful.

Where to send information: Identify the full name/business, address, phone & contact information with the name of the individual who is to receive the information.

Release instruction: You may choose to receive your records on paper by mail, in a CD/DVD if available, via secure email or other format. If you choose "other" as the format, we will review those requests on a case by case basis.

How soon will the records request be processed? You have the right to request a copy of your Protected Health Information (PHI). Per the HIPAA Privacy Rule we have 30 days to process your request but our goal at Beacon is to complete your request within 14 business days after receipt, most requests are processed sooner.

Can a request be denied? Yes, [under federal law](#) - Access of individuals to protected health information, HIPAA allows a provider to deny a patient's request. The Privacy Officer is responsible for communicating any denials to the patient.

How much will my records cost? Beacon does not charge you for copies requested for continuity of care sent to your healthcare provider. Beacon has contracted with a provider of release of information services; CIOX Health is committed to providing you with your requested medical record in an efficient and highly secure manner. Please don't hesitate to contact CIOX Health at 800.367.1500 if you have any questions about the services CIOX Health provides on the facility's behalf, or about the bill you may receive as a result of your request for medical records.

Mail or fax completed forms to the specific BEACON site. See beacon.health/records or www.beaconhealthsystem.org/find-a-provider for hours of operation and phone numbers.

- **Community Hospital of Bremen** 1020 High Rd, Bremen, IN, 46506 Ph. 574-546-8088, Fax 574-546-3196
- **Elkhart General Hospital** 600 East Blvd., Elkhart, IN, 46514 Ph. 574-523-3197, Fax 574-523-3474
- **Memorial Hospital** 615 N. Michigan Street, South Bend, IN, 46601 Ph. 574-647-2021, Fax 574-647-2022
- **Beacon Medical Group** -- mail or fax to specific office; to check status on a request - call 574-647-2021