

**REQUEST TO ACCESS AND/OR INSPECT
PROTECTED HEALTH INFORMATION IN
A DESIGNATED RECORD SET**



Use this form to request access to or inspection of your protected health information (PHI) in records that we or our business associates maintain in designated record sets.

If you have questions, please call AmeriHealth Caritas VIP Care Choice (HMO-SNP) Member Services at **1-833-467-3302 (TTY 711)**, Monday through Friday, 8 a.m. - 8 p.m., from April 1 to September 30; or seven days a week, 8 a.m. - 8 p.m., from October 1 to March 31.

Member Name:	
Member Address:	
Member Phone Number:	
Member/Health Plan Identification Number:	
Please read the following statements and provide the requested information. You have the right to request access to or inspection of PHI in the designated record set that we or our business associates maintain. We may decline your request if we did not create the records, the records are not part of our designated record set, or the law does not give you the right to access the records. Please tell us which records you want to access or inspect:	
Please provide the dates of the records you want to access or inspect:	
Please tell us the reason(s) you want to access or inspect a copy of the records:	
Please sign and date:	
Signature:	Date:
Personal representative: If you are not the member, please sign and date below. Check the box that describes your relationship to the member. If you are not the parent, please attach proof of your relationship to the member (e.g., legal guardian, power of attorney, personal representative documentation, etc.).	
Print name of personal representative:	
Signature of personal representative:	Date:
<input type="checkbox"/> Parent <input type="checkbox"/> Legal guardian <input type="checkbox"/> Power of attorney <input type="checkbox"/> Executor <input type="checkbox"/> Other:	

Please return this form to:
AmeriHealth Caritas VIP Care Choice Privacy Office
3875 West Chester Pike
Newtown Square, PA 19073
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AmeriHealth Caritas VIP Care Choice is an HMO-SNP plan with a Medicare contract and a contract with the Delaware Medicaid program. Enrollment in AmeriHealth Caritas VIP Care Choice depends on contract renewal.

www.amerihhealthcaritasvipcare.com/de


AmeriHealth Caritas[®]

VIP Care Choice