



A covered individual and/or a personal representative may request access to his or her protected health information (PHI) maintained by the Medical Plans in a designated record set (DRS) by completing this form and returning it to the Board of Pensions (see address on page 2).

Upon receipt of this completed form, a decision regarding the request will be made within the time frames specified by state or federal law. Incomplete request forms will be returned; only complete forms can be processed.

Please complete the following: (See Definition of Terms on page two)	
Name of covered individual	Date of request
Requestor's name (if different)	Last 4 digits of SSN
If you are requesting access to information on behalf of someone other than yourself, please enclose written proof of your authority to do so (i.e., Power of Attorney, Guardianship Order, Custody Order, Court Order).	
Signature of requestor	

Information requested		
You may request all or part of the information in your designated record set. Please check below what part of the record you are requesting. See Definition of Terms on page two for clarification.	From (mm/dd/yyyy)	To (mm/dd/yyyy)
Enrollment and benefits information		
Claims		
Medical records		
The complete designated record set (DRS)		
The DRS only for these dates		

Information format		
<input type="checkbox"/> Paper copy <input type="checkbox"/> Summary (there may be a charge for this) <input type="checkbox"/> Electronic copy		
If you are requesting that information be mailed to you, please provide an address below. You may be charged a fee for copying or summarizing and mailing the information.		
Address		
City	State	ZIP
Phone	Email	

Due to current circumstances, DO NOT mail this form to the Board of Pensions.
To avoid delays in processing, email your completed form to memberservices@pensions.org. If you need assistance emailing this form, please contact the Board at 800-773-7752 (800-PRESPLAN).



Definition of terms

Covered Individual: person covered by the Medical Plan of the Benefits Plan of the Presbyterian Church (U.S.A.)

Designated Record Set: a group of records maintained by or for the Medical Plans of the Benefit Plan of the Presbyterian Church (U.S.A.), which includes

- the enrollment, payment, claims adjudication, and case or medical management record systems maintained by or for the Medical Plans, or
- information used in whole or in part by or for the Medical Plans to make reimbursement decisions about individuals

Enrollment and Benefit Information: includes name, age, sex, date of birth, address, employment, effective salary, etc., while benefit information is usually the type of healthcare coverage an individual is eligible to receive

Personal Representative: someone with the legal authority to act on a covered individual's behalf to make decisions about that person's healthcare. Parents may be personal representatives for minors, except for those minors who have been given the legal freedom to act on their own.

Personal representatives may include guardians, conservators and other persons who have been given legal responsibility for another individual. Federal law, state law, and the specific terms of the appointment determine the authority granted to the personal representative.

Questions? Call the Board of Pensions at 800-773-7752 (800-PRESPLAN) or email memberservices@pensions.org.

Due to current circumstances, DO NOT mail this form to the Board of Pensions.

To avoid delays in processing, email your completed form to memberservices@pensions.org. If you need assistance emailing this form, please contact the Board at 800-773-7752 (800-PRESPLAN).