

## Request to Change My Health Records

### Enrollee Information

Insert information about the individual whose information will be changed.

**Name**

**Address**

**Date of Birth**        
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**Social Security Number**

**Phone Number**

### Requesting Change

**I am asking BlueCare/  
 TennCareSelect to make a change to my health information on file.  
 I understand that:**

- BlueCare/TennCareSelect cannot make a change to records that BlueCare/TennCareSelect did not create.
- BlueCare/TennCareSelect will only change records if they are incomplete or wrong.
- I must give proof of the change I want made to my record. Any proof you can show us will help us understand the facts about your case. Attach it to this page when you send it back. Write on more pages if necessary.

**I am asking for this change to be made to the record of my health information:**

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**This is why I want the information limited:**

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Sign here: **X** \_\_\_\_\_ Date: \_\_\_\_\_

## Your Right to Change Information in your Record

- You have a right to ask for changes to information we have about you.
- You have a right to have an answer within 60 days.
- If there are delays in getting you the answer, you will get a letter. The delay cannot be more than 30 days. You will get an answer in writing.

## What if you do not agree with our answer?

If you do not agree, you can write another letter. It should say why you think your information should have been changed. We will keep your letter(s) with your record. We may also write a reply to your letter(s). A copy of our reply will be put in your record and you will get a copy. Anytime your record is shared, we will include both your letter(s) and our reply. We will only send these things if the information shared is on the same subject as your letter(s).

## You have a right to file a privacy complaint.

Do you have questions? Do you think that your privacy rights have been violated? If you have a question or a complaint, you can contact one of these offices. TennCare Information Line at 1-800-342-3145, Or

### **Bureau of TennCare**

Attn: Privacy Office  
310 Great Circle Road  
Nashville, TN 37243

Phone: 1-866-797-9469  
Fax: 1-615-532-7322

### **BlueCross BlueShield of Tennessee**

Privacy Office  
1 Cameron Hill Circle  
Chattanooga, TN 37402

Phone: 1-888-455-3824  
e-mail: [privacy\\_office@bcbst.com](mailto:privacy_office@bcbst.com)

### **U.S. Department of Health and Human Services**

Atlanta Federal Center Suite 3B70  
61 Forsyth Street, SW  
Atlanta, GA 30303-0064

Phone: 1-404-562-7886

**You will not be punished if you complain or ask for help.**

## PLEASE DO NOT WRITE BELOW THIS LINE

### *For BlueCare /TennCareSelect Use Only*

Location of Record:

Record Holder:

Approved

Denied

Delayed

If delayed, we will act on your request by

Comments

BlueCare/TennCareSelect Representative Signature

Date

**Spanish: Español** ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al BlueCare 1-800-468-9698. Llame al TennCareSelect 1-800-263-5479 (TTY: 711: 888-418-0008).

**Kurdish:** کوردی ناگاداری: نهگهر به زمانی کوردی قهسه دهکبیت، خزمهنگوزار بهکانی یار مهتی زمان، بهخۆرای، بو تو بهردهسته. پهیهندی به 1-800-263-5479 TennCareSelect 1-800-468-9698 BlueCare به (711: 888-418-0008) TTY بکه.



**Do you need help with your health care, talking with us, or reading what we send you? Call us for free at: BlueCare 1-800-468-9698 or TennCareSelect 1-800-263-5479 (TTY: 711 and ask for 888-418-0008).**

We obey federal and state civil rights laws. We do not treat people in a different way because of their race, color, birth place, language, age, disability, religion, or sex. Do you think we did not help you or treated you differently? Then call BlueCare 1-800-468-9698, TennCareSelect 1-800-263-5479 or TennCare 1-855-857-1673 (TRS 711) for free.

BlueCare Tennessee  
1 Cameron Hill Circle | Chattanooga, TN 37402

**[bluecare.bcbst.com](http://bluecare.bcbst.com)**

BlueCare Tennessee is an Independent Licensee of the BlueCross BlueShield Association

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