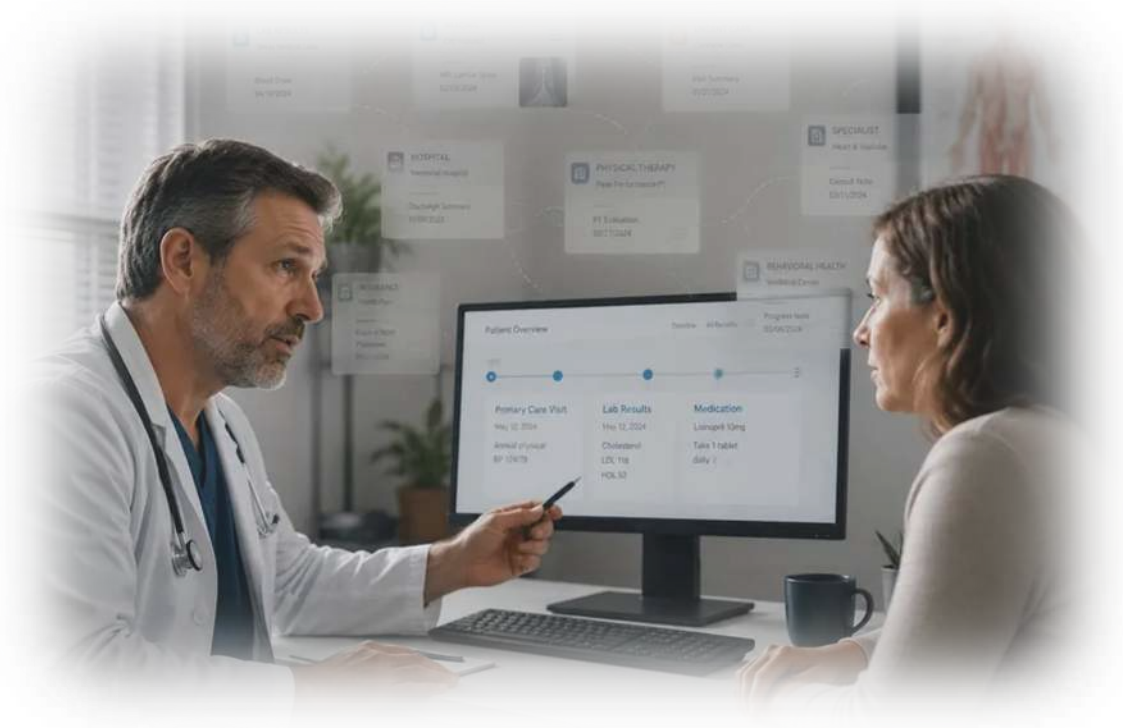




T H E C O M P L E T E G U I D E



# You Already *Own It*

A plainspoken guide to getting your medical records under HIPAA, the 21st Century Cures Act, and the federal protections you may not know you have.

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**Seven chapters. Six ready-to-use letter templates. Every federal complaint portal.**

**A complete plain-English glossary.**



# You Already Own It

## A Plainspoken Guide to Getting Your Medical Records

First edition · 2026 Published by Synergyix Healthcare Solutions Centennial, Colorado · United States

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This guide is provided as a free public service. You are encouraged to share it, forward it, print it, and distribute it to anyone who might benefit. Attribution is appreciated but not required.

**This guide is informational and is not legal advice.**

For specific legal questions about your situation, consult a licensed attorney.

The federal laws cited HIPAA (45 CFR § 164.524) and the 21st Century Cures Act (45 CFR Part 171) are current at the time of publication. All government portal URLs and federal regulations are subject to change.

Find the complete guide online at:

[mychartcount.com/guide/](https://mychartcount.com/guide/)

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# Why This Matters

The 21st Century Cures Act gave every American the right to a complete copy of their medical records mostly for free. Almost nobody has used it. This guide is about why that should change, and how.

In 2016, Congress passed a law called the 21st Century Cures Act. It did many things. It funded cancer research. It funded mental health care. It funded the opioid response. Buried in Title IV, it also did something most Americans have never heard about: it gave every patient a federal right to obtain a complete copy of their own medical records, in any format the provider can produce, mostly for free.

It strengthened a right that HIPAA had already created back in 2003 the Right of Access at 45 CFR § 164.524 and it added enforcement: a federal agency, the Office of the National Coordinator at HHS, with authority to investigate and penalize healthcare organizations that interfere with your access to electronic health information.

Nine years later, the right exists. The enforcement exists. The portals exist. Government websites describe the process in dense, dutifully bureaucratic language. And yet almost nobody knows.

## A small request that changes the conversation

When patients do request their records, two things happen that surprise everyone including the patients.

First, the records are usually much longer than expected. The average adult with a few chronic conditions, a couple of hospitalizations, and twenty years of routine care typically has hundreds of pages of records distributed across dozens of organizations. The pharmacy holds part of it. The primary care office holds part of it. The hospital holds a different part. The insurance company has yet another view. No single place holds the whole picture.

Second, when you actually have your records in hand, you read differently. You catch mistakes. You notice patterns. You see what one doctor missed that the next one had to figure out. You bring them to the next appointment and the conversation changes.

## What this guide is

Seven chapters. The first explains why this matters. The second explains the law in plain English. The third walks you through the process step by step. The fourth gives you the letters you need to send. The fifth tells you what to do if a provider denies or delays. The sixth covers the unusual cases. The seventh is a reference of every URL, form, phone number, and term used in the guide.

No signup. No email required. No fees. Free to download. Free to share.

### THE FRAMING

Federal law gives you the right to your medical records. This guide gives you the instructions for using it. **That's the whole project.**

The chapters that follow assume nothing about your **background**. They use the legal terms when the legal terms matter and explain them when they appear. They cite the actual federal statutes so you can verify everything yourself. They name the enforcement agencies and the specific complaint portals so that if you need them, you know where to go.

**The next chapter walks through the law that makes all of this possible.**

# The Law: Cures Act + HIPAA Right of Access

Two laws give you the right to your medical records. One came from a Democratic White House. The other was finalized under a Republican administration. The enforcement actions that put real teeth in both have continued under every president since.

That isn't an accident. Patient access to medical records is one of the few subjects in American healthcare policy where the political parties have not been able to find anything to fight about for thirty years. You don't need to memorize the law. You need to know what it gives you.

## The first law — HIPAA, 1996



The Health Insurance Portability and Accountability Act was signed by President Bill Clinton in 1996. The exact citation for the patient right is **45 CFR § 164.524**. The shorthand is the "Right of Access." It says that any organization that holds your protected health information your doctor, your hospital, your insurance company, your lab must give you a copy when you ask for it.

They have thirty days. They can charge a small fee for actually copying the records, but they cannot charge you for the time it takes to find them, look through them, or get them ready. That right has been federal law since 2003.

## The second law — The Cures Act, 2016



### THE VOTE

**House:** 392 to 26 (Nov 30, 2016). **Senate:** 94 to 5 (Dec 7, 2016). Signed into law by President Obama on December 13, 2016.

The 21st Century Cures Act passed the House on November 30, 2016 by a vote of **392 to 26**. It passed the Senate the following week by a vote of **94 to 5**. The bill's lead authors were Representative Fred Upton, a Republican from Michigan, and Representative Diana DeGette, a Democrat from Colorado.

Congress directed HHS to write rules saying, in effect: in addition to giving patients their records on request, healthcare organizations are not allowed to interfere with the electronic flow of health information at all. That directive became the Information Blocking Rule.



## The Information Blocking Rule, 2020

The Office of the National Coordinator for Health Information Technology (ONC) finalized the Information Blocking Rule in May 2020. The citation is **45 CFR Part 171**. It applies to three groups: healthcare providers, the technology vendors who build electronic health record systems, and the health information networks that move data between organizations.

None of them are allowed to engage in any practice that interferes with the access, exchange, or use of your electronic health information. There are eight narrow exceptions, all of them spelled out in the regulation. Outside those eight exceptions, blocking is illegal. This rule was developed during the first Trump administration. It was published under the first Trump administration. It is being enforced under every administration since.

### Free, and yours

The records are **yours**. Not the doctor's. Not the hospital's. Not the insurance company's. Federal law uses the phrase "the individual's right of access" deliberately. The institutions that hold your records are custodians of information about you. **You are the owner.**

And in most cases, getting your records is **free**. Under 45 CFR § 164.524, a provider can charge a small, cost-based fee but only for actual labor of copying, actual supplies, and actual postage. They are specifically prohibited from charging you for the time it takes to search for your records, retrieve them from storage, review them, identify which records belong to you, or prepare them for delivery.

And if you ask for your records electronically through a provider's patient portal what the regulations call the View, Download, and Transmit function of Certified Electronic Health Record Technology (HHS guidance states that providers **cannot charge any fee at all**).

### What enforcement actually looks like

The HIPAA Right of Access Initiative was launched by OCR in 2019. As of December 2025, OCR has announced **54 enforcement actions** under that initiative. A few recent examples, all involving patients who requested their own records:

- **Concentra, Inc.** — **\$112,500**. A Texas-based occupational health provider, settled in December 2025 after a patient made six requests beginning in February 2018 and didn't receive records until March 2019.
- **Oregon Health & Science University** — **\$200,000**. Paid in March 2025 after a personal representative's repeated requests went unanswered for nearly two years.
- **American Medical Response** — **\$115,200**. Civil monetary penalty in August 2024 for taking 370 days to respond to a single patient request.
- **New Jersey hospital system** — **\$100,000**. Paid in April 2024 for denying a personal representative access.

These are not abstract. Every one of those settlements began with a single patient filing a single complaint.

## What states have added

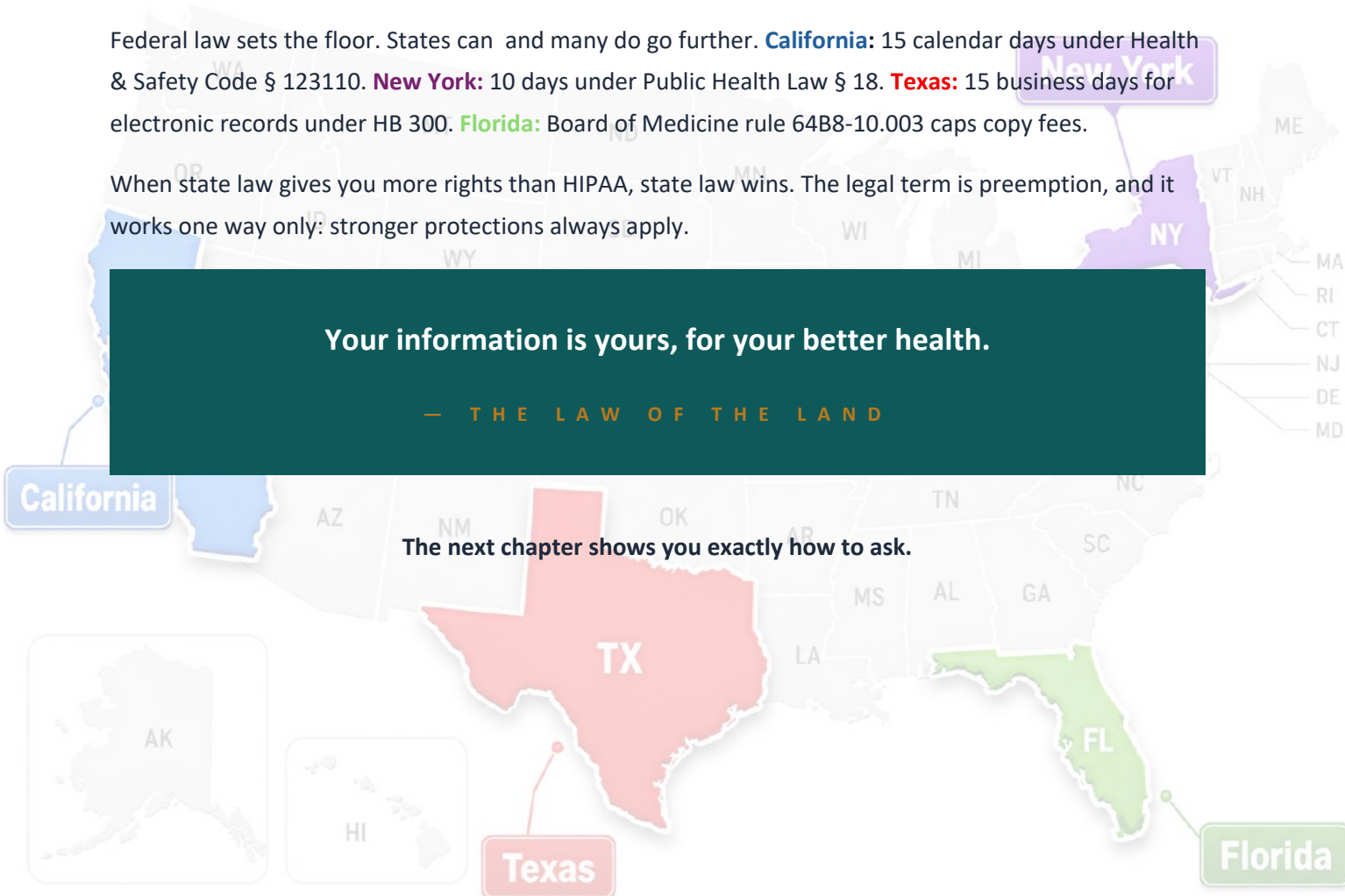
Federal law sets the floor. States can and many do go further. **California:** 15 calendar days under Health & Safety Code § 123110. **New York:** 10 days under Public Health Law § 18. **Texas:** 15 business days for electronic records under HB 300. **Florida:** Board of Medicine rule 64B8-10.003 caps copy fees.

When state law gives you more rights than HIPAA, state law wins. The legal term is preemption, and it works one way only: stronger protections always apply.

Your information is yours, for your better health.

— THE LAW OF THE LAND

The next chapter shows you exactly how to ask.



# How to Request Your Records

Knowing your rights is one thing. Using them is another. This chapter walks you through the actual mechanics what to do this week, this afternoon, today to get the records you're entitled to.

The whole process comes down to seven steps. None of them are complicated. Most people who get stuck get stuck because nobody told them what to expect at each step.

## Step 01 — Make a list of everyone who has ever treated you

Your primary care doctor. Every specialist. Every hospital. Every emergency room. Every urgent care. Every imaging center. Every lab. Every pharmacy. Every insurance company. Write them all down. You don't need exact addresses yet just names and approximate years.

## Step 02 — Figure out who to ask first

Start with the organizations that hold the most useful information: **(1)** your current primary care doctor, **(2)** your most recent hospitalization or ER visit, **(3)** any specialist from the past five years, **(4)** your pharmacy, and **(5)** your insurance company. Pick three and start there.

## Step 03 — Try the patient portal first

HHS explicitly recommends starting with the patient portal if your provider has one. Under the 21st Century Cures Act, providers are required to give you immediate access through the portal to nearly all of your test results, clinical notes, and imaging reports without a request, without a form, without a fee.

### PORTAL ACCESS = FREE

When records come to you through the patient portal's View, Download, and Transmit function, **HHS guidance states no fee can be charged at all.**

## Step 04 — If the portal isn't enough, ask in writing

Send a written request to the **Health Information Management (HIM) Department** at a hospital, or the **medical records coordinator** at a smaller practice. Email is fine. Certified mail with return receipt is better. Hand-delivery with a stamped copy returned to you is best it starts the 30-day clock with proof of the start date.

## Step 05 — What to ask for, specifically

Ask for these by name: **clinical notes** (progress, consult, operative, discharge), **lab and pathology results** with actual values, **imaging reports AND the images** in DICOM format, **medication records, billing and claims records**, and **all electronic health information (EHI)** the Cures Act umbrella term that closes loopholes.

## Step 06 — Get the format right

Always ask for electronic. PDF is fine. Direct upload to a portal is better. DICOM for imaging is essential. If a provider gives you a CD with imaging files, you can use a free online DICOM viewer to convert it tools listed in Chapter 7.

## Step 07 — Track the clock

The federal 30-day clock starts when your written request is received. Write down the submission date. Mark 30 days on a calendar. If your state has a faster rule (California 15, New York 10), the shorter deadline applies.

## A bare-minimum starter letter

If you want to do something today, this is the shortest written request that meets the federal requirements:

### STARTER LETTER — COPY, FILL IN, SIGN

[Your name]  
[Your address]  
[Today's date]

[Provider name]  
Attn: Medical Records / Health Information Management

I am requesting a **complete copy of all my medical records** under my right of access in **45 CFR Section 164.524** and the **21st Century Cures Act**. Please include all clinical notes, lab results, imaging reports and images (in DICOM format), medication records, and billing records.

Please send the records electronically to [your email] or via your patient portal.

My date of birth is [DOB]. My phone is [phone].  
I have attached a copy of my driver's license for ID verification.

Sincerely,  
[Your signature]  
[Your printed name]

**Six sentences.** Sign it, attach a photocopy of your ID, send it. The provider is legally required to respond within 30 days. The next chapter has the longer, more detailed templates for every scenario.

# The Templates



Six ready-to-use letters that have been used to successfully request medical records from thousands of doctors, hospitals, insurers, and pharmacies. Each cites the specific federal law that backs your request. Fill in your information. Sign. Send.

You can also download all six templates as Word or PDF files at

[mychartcount.com/guide/the-templates.html](https://mychartcount.com/guide/the-templates.html).

## Template 01 — Doctor / Clinic / Specialist

**When to use:** Requesting your complete records from any individual doctor, clinic, or specialist's office where you've been seen.

### TEMPLATE 01 — DOCTOR / CLINIC

[Your name] · [Address] · [Phone] · [Email]  
[Today's date]

[Doctor or Clinic Name]  
Attn: Medical Records Coordinator  
[Clinic Address]

**Re: Request for Access to PHI**

**\*\*Patient:** [Your Name] · DOB: [Your DOB]

Pursuant to my right of access under HIPAA (45 CFR § 164.524) and the 21st Century Cures Act information blocking rule (45 CFR Part 171), I am requesting a complete copy of all my PHI maintained by your practice, including:

- All clinical notes and progress notes
- All laboratory and pathology results
- All imaging reports AND DICOM image files
- All medication and prescription records
- All billing and claims records
- All electronic health information (EHI)

Please provide electronically (PDF or secure portal).  
Federal law requires response within 30 days.

Sincerely,  
[Your signature and printed name]

## Template 02 — Hospital (Full Record Set)

**When to use:** Requesting records from a hospital. Lists every category by name so nothing gets left out by the HIM Department.

### TEMPLATE 02 — HOSPITAL

[Your name] · [Address] · [Phone] · [Email]  
[Today's date]

[Hospital Name]  
Health Information Management Department

**Re: Complete Hospital Record Set**

\*\*Patient: [Name] · DOB: [DOB] · MRN: [if known]

Under HIPAA (45 CFR § 164.524) and the Cures Act,  
I request ALL of the following, not summaries:

INPATIENT: admission notes, H&P, progress notes,  
discharge summaries, operative reports  
EMERGENCY DEPT: physician notes, orders, results  
DIAGNOSTIC: labs (with values), pathology, imaging  
reports AND DICOM image files  
MEDICATION: MAR, discharge medication lists  
BILLING: itemized records, UB-04 claim forms

Please deliver electronically. I do not request a CD-ROM  
as my computer cannot read it.

Sincerely,  
[Your signature and printed name]

## Template 03 — Insurance Company / Health Plan

**When to use:** Requesting claims data. Often the most complete reconstruction of your care history.

### TEMPLATE 03 — INSURANCE COMPANY

[Your name] · [Address] · [Phone] · [Email]  
[Today's date]

[Insurance Company Name]  
Attn: Member Records / HIPAA Privacy Officer

**Re: Complete Member Records and Claims Data**  
\*\*Member: [Name] · Member ID: [number]

Under HIPAA (45 CFR § 164.524), which applies to health plans, I request a complete copy of all PHI you maintain about me, including:

- All claims data with CPT/HCPCS and ICD codes
- All prior authorization requests and decisions
- All Explanations of Benefits (EOBs)
- All medical review notes and determinations
- All appeals and grievance records
- All eligibility and enrollment records

Please deliver electronically to [your email].

Sincerely,  
[Your signature and printed name]

## Template 04 — Pharmacy

**When to use:** Pharmacy records are usually the most accurate medication history available more complete than what's in any doctor's office.

### TEMPLATE 04 — PHARMACY

[Your name] · [Address] · [Phone] · [Email]  
[Today's date]

[Pharmacy Name and Chain]  
Attn: Pharmacy Manager / HIPAA Privacy Officer

**Re: Complete Prescription Fill History**

\*\*Patient: [Name] · DOB: [DOB]

Under HIPAA (45 CFR § 164.524), I request  
a complete copy of my prescription fill history,  
including:

- All prescriptions filled (drug, strength, qty, days' supply, prescriber, dates)
- All refill records
- All immunizations administered
- All MTM (medication therapy management) records
- All insurance claims submitted on my behalf

If your system covers ALL chain locations, please  
provide a chain-wide history. If only this location,  
indicate that limitation.

Sincerely,  
[Your signature and printed name]

## Template 05 — Personal Representative (Family Member)

**When to use:** Requesting records on behalf of a family member minor child, aging parent (with POA), deceased relative (executor), spouse, court-appointed guardian. You will need proof of your authority.

### TEMPLATE 05 — PERSONAL REPRESENTATIVE

[Your name as Personal Rep] · [Address]  
[Today's date]

[Provider/Hospital/Insurer Name]  
Attn: Medical Records / HIPAA Privacy Officer

**Re: Personal Representative Request**

**\*\*Patient:** [Patient's Name] · DOB: [Patient DOB]

**\*\*Personal Rep:** [Your Name]

**\*\*Relationship:** [parent/spouse/executor/etc.]

Under HIPAA (45 CFR § 164.502(g) and 164.524), I am the legally authorized personal representative of [Patient's Name]. Attached:

- Birth certificate (parent of minor)
- Healthcare power of attorney
- Court-appointed guardianship order
- Letters testamentary (executor)
- HIPAA authorization signed by patient

I request a complete copy of all PHI for the patient.  
Please deliver electronically to [your email].

[Your signature and printed name]

## Template 06 — Follow-Up (**Deadline Missed**)

**When to use:** When 30 days have passed and you haven't received your records, or got only partial records, or were quoted unreasonable fees. This letter alone often resolves the issue.

### TEMPLATE 06 — FOLLOW-UP

[Your name] · [Address] · [Phone] · [Email]  
[Today's date]

[Provider Name]  
Attn: HIPAA Privacy Officer / Compliance Officer

**Re: SECOND NOTICE – Failure to Respond**  
\*\*Original Request: [date of first letter]  
\*\*Patient: [Name] · DOB: [DOB]

On [date], I submitted a written request under HIPAA (45 CFR § 164.524) and the Cures Act (45 CFR Part 171). More than 30 days have passed without compliance.

I am giving you 14 days from this letter to comply, or I will file complaints with:

- HHS Office for Civil Rights  
([ocrportal.hhs.gov/ocr/cp/wizard\\_cp.jsf](http://ocrportal.hhs.gov/ocr/cp/wizard_cp.jsf))
- HHS Office of the National Coordinator  
([healthit.gov/report-info-blocking](http://healthit.gov/report-info-blocking))
- My state attorney general
- The state medical board

OCR has announced 54 enforcement actions since 2019, with penalties from \$16,500 to over \$200,000.

Sincerely,  
[Your signature and printed name]

### A few notes on using these

**Always keep a copy of every letter you send.** Email is easiest because the email itself is the record. If you mail, send certified with return receipt. Whatever you use, the goal is a paper trail with a date on it.

***You don't have to be a lawyer to use the law. The law was written for you.***

CHAPTER 05 · YOU ALREADY OWN IT

# What to Do If They Push Back



You sent the request. The thirty days passed. You didn't get your records. This chapter is for that moment.

**Patients win these fights.** OCR has resolved 54 formal enforcement actions in the last six years. Most of those settlements began with a single complaint filed online by one patient. You have four escalation paths. Most situations only need the first one or two.

## What "pushing back" looks like

<p><b>1</b></p> <p><b>Silence</b></p> <p>No response, no denial, no email, nothing. Easiest to escalate — the deadline is objective.</p>	<p><b>2</b></p> <p><b>Partial records</b></p> <p>They sent something, but pieces are missing. A summary instead of the full file.</p>	<p><b>3</b></p> <p><b>Unreasonable fees</b></p> <p>"It'll be \$400." If records exist electronically and you asked electronically, the fee should be zero.</p>	<p><b>4</b></p> <p><b>Bureaucratic stonewall</b></p> <p>Required in-person visits, third-party vendors, notarized forms. Friction designed to make you give up.</p>	<p><b>5</b></p> <p><b>Outright denial</b></p> <p>Must come in writing, cite a specific exception, and inform you of your right to appeal.</p>

## Path 01 — Send the follow-up letter first

Before filing a federal complaint, send Template 6. This isn't about being polite. It's about giving the provider a clear, dated record that they were on notice, with a 14-day window to fix it. When OCR or ONC eventually investigates, the existence of this letter strengthens your case substantially.

## Path 02 — File an OCR complaint (HIPAA)

### OCR HIPAA COMPLAINT PORTAL

File a complaint with HHS Office for Civil Rights

[ocrportal.hhs.gov/ocr/cp/wizard\\_cp.jsf](https://ocrportal.hhs.gov/ocr/cp/wizard_cp.jsf)

Free, public, no lawyer required. About fifteen minutes to file.

**Deadline:** 180 days from the violation. **Penalties have ranged** from \$16,500 to over \$200,000.

### ANTI-RETALIATION

Federal law explicitly prohibits any retaliation against you for filing a HIPAA complaint. **If they try, that becomes a separate federal violation.**

## Path 03 — File an ONC information blocking complaint

### ONC INFORMATION BLOCKING PORTAL

Report information blocking to HHS / ONC

[healthit.gov/report-info-blocking](https://healthit.gov/report-info-blocking)

ONC sends qualifying complaints to HHS OIG for investigation under the Cures Act.

**You can file anonymously** — your identity is exempt from FOIA disclosure. Filing OCR + ONC for the same situation is allowed.

## Path 04 — State-level escalation

**State medical board.** Every state has one. "Failure to provide patient records" is a standard complaint category. Search "[your state] medical board file complaint."

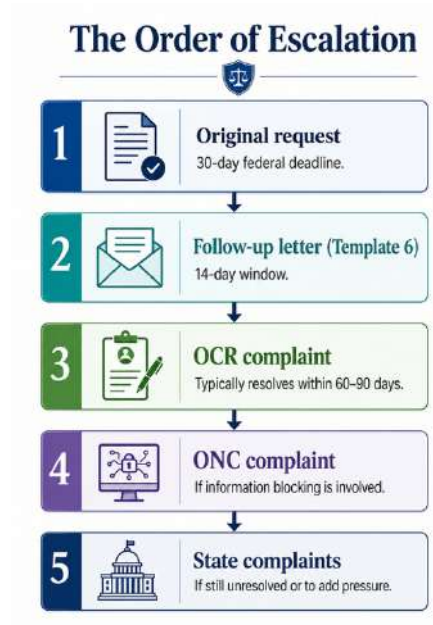
**State attorney general.** Consumer protection division for fees, billing, and institutional issues. Search "[your state] attorney general consumer complaint."

**State health department.** Enforces state-specific access laws (California 15, New York 10, etc.).

### The order of escalation

- Original request → 30-day federal deadline.
- Follow-up letter (Template 6) → 14-day window.
- OCR complaint → typically resolves within 60-90 days.
- ONC complaint, if information blocking is involved.
- State complaints, if still unresolved or to add pressure.

In ninety percent of cases, you won't need to go past Step 3.



**You are not being difficult. You are exercising a federal right that Congress wrote specifically for you. The provider is the one obligated to comply. If they don't, the system has channels for that. Use them.**

— THE LAW OF THE LAND

# Special Cases

Most records requests follow the standard pattern. This chapter is for the situations that don't. The doctor retired. The practice closed. The records crossed state lines. The person who owns them is no longer alive. The records were generated in a military hospital.

## Case 01 — The practice has closed

Federal and state law require that when a medical practice closes, a **custodian of records** must be designated. Records are typically retained **6 to 10 years from the last date of treatment**, longer for minors. To find the custodian: check the old website or door notice, call the state medical board, call the state health department (for facilities), check nearby practices that may have absorbed the closed one.

## Case 02 — The doctor has passed away

When a physician dies, their records pass to their estate. To find the executor: check the probate court in the county where the doctor practiced (records are public), check the obituary, contact the state medical board, or check whether the practice continued under another physician.

## Case 03 — The records are in another state

Federal law applies in all 50 states. Records can be sent electronically anywhere. If a provider claims they "can't release records out of state," that's not a real rule — HIPAA preempts any contradictory state law. The only legitimate complication is identity verification.

## Case 04 — VA and military records

### SERVICE TREATMENT RECORDS & DD-214

#### eVet Records — National Archives online portal

[archives.gov/veterans/military-service-records](https://archives.gov/veterans/military-service-records)

Online request. Free for veterans and next-of-kin. 10-90 day timeline.

### PAPER OPTION

#### SF-180 — Request Pertaining to Military Records

[archives.gov/research/order/standard-form-180.pdf](https://archives.gov/research/order/standard-form-180.pdf)

Mail to National Personnel Records Center, 1 Archives Drive, St. Louis, MO 63138. Phone: 314-801-0800.

### VA-PROVIDED CARE

#### My HealtheVet patient portal

[myhealth.va.gov](https://myhealth.va.gov)

For care at VA medical centers after separation. For C-Files: AccessVA at [eauth.va.gov/accessva](https://eauth.va.gov/accessva).

### 1973 FIRE AT NPRC

A 1973 fire destroyed an estimated 16-18 million Army and Air Force records (1912-1964 service). The NPRC has a reconstruction process — submit alternative evidence (unit histories, sick call logs, fellow-veteran statements).

## Case 05 — Records for a deceased family member

HIPAA protects a deceased person's records for **50 years after death**. During that window, records are accessible only to the **personal representative**: the executor or administrator of the estate, a next-of-kin authorized under state law, or a court-appointed legal representative. You will need: **(1)** death certificate, **(2)** documentation of legal authority (letters testamentary, court order, marriage certificate), **(3)** your government-issued photo ID. Template 5 is built for this.

## Case 06 — Psychotherapy notes

HIPAA recognizes a narrow exception for **psychotherapy notes** — the therapist's personal process notes kept separately from the rest of the file. But session summaries, diagnoses, medications, treatment plans, and lab work are **not** psychotherapy notes and **must** be released. A blanket refusal to release any mental health information is not consistent with HIPAA.

## Case 07 — Records from outside the United States

Records of care received outside the U.S. are covered by the laws of the country where care was given. Most developed countries have analogous patient access laws — the EU's GDPR is in some ways stronger than HIPAA. Allow 60-90 days for international requests.

**The right travels with you. The right travels with the records. Wherever  
the records went, somebody has them, and somebody has a legal  
obligation to give them to you.**

— T H E L A W O F T H E L A N D

# Resources and Glossary

Every URL, form, phone number, and term used across the previous six chapters, gathered into one place. Use this as a reference while you work through your own requests.

## Federal complaint portals

### HHS OFFICE FOR CIVIL RIGHTS

#### File a HIPAA Right of Access complaint

[ocrportal.hhs.gov/ocr/cp/wizard\\_cp.jsf](https://ocrportal.hhs.gov/ocr/cp/wizard_cp.jsf)

**Deadline:** 180 days from violation. **Phone:** 1-800-368-1019.

### HHS OFFICE OF THE NATIONAL COORDINATOR

#### Report information blocking (Cures Act)

[healthit.gov/report-info-blocking](https://healthit.gov/report-info-blocking)

Investigated by HHS OIG. You can file anonymously.

## Federal informational resources

- HHS Right to Access overview — [hhs.gov/hipaa/for-individuals/right-to-access](https://hhs.gov/hipaa/for-individuals/right-to-access)
- HHS HIPAA for Individuals — [hhs.gov/hipaa/for-individuals](https://hhs.gov/hipaa/for-individuals)
- ONC Information Blocking overview — [healthit.gov/topic/information-blocking](https://healthit.gov/topic/information-blocking)
- HHS OIG Information Blocking enforcement — [oig.hhs.gov/reports/featured/information-blocking](https://oig.hhs.gov/reports/featured/information-blocking)
- HHS Resolution Agreements — [hhs.gov/hipaa/for-professionals/compliance-enforcement/agreements](https://hhs.gov/hipaa/for-professionals/compliance-enforcement/agreements)

## Military and VA records

- eVetRecs (online portal) — [archives.gov/veterans/military-service-records](https://archives.gov/veterans/military-service-records)
- SF-180 (paper form) — [archives.gov/research/order/standard-form-180.pdf](https://archives.gov/research/order/standard-form-180.pdf)
- NPRC mailing address — 1 Archives Drive, St. Louis, MO 63138 · (314) 801-0800
- My HealtheVet (VA portal) — [myhealth.va.gov](https://myhealth.va.gov)
- AccessVA (C-Files) — [eauth.va.gov/accessva](https://eauth.va.gov/accessva)



## State medical boards and attorneys general

**Federation of State Medical Boards:** [fsmb.org/contact-a-state-medical-board](https://fsmb.org/contact-a-state-medical-board) — directory of every state medical board.

**National Association of Attorneys General:** [naag.org/find-my-ag](https://naag.org/find-my-ag) — directory of every state AG's office.

## State quick reference (faster access laws)

- **California:** 15 calendar days — Health & Safety Code § 123110. Paper copies 25¢/page.
- **New York:** 10 days — Public Health Law § 18. Paper copies 75¢/page.
- **Texas:** 15 business days (electronic) — HB 300. No retrieval fees.
- **Florida:** 30 days — Board of Medicine rule 64B8-10.003.
- **Washington:** 15 working days — RCW 70.02.080.

## Free online DICOM viewers

- **Medicai** — [medicai.io](https://medicai.io) — Browser-based DICOM viewer. No account required for view-only.
- **PostDICOM** — [postdicom.com](https://postdicom.com) — Free online DICOM viewer with cloud storage.
- **RadiAnt DICOM Viewer** — [radiantviewer.com](https://radiantviewer.com) — Free Windows desktop, diagnostic quality.
- **MicroDicom** — [microdicom.com](https://microdicom.com) — Free Windows desktop alternative.

# Glossary

Plain-English definitions for every acronym and term you'll encounter when requesting and reviewing your medical records.

## **HIPAA**

**Health Insurance Portability and Accountability Act of 1996.** The federal law that sets the floor for medical records access and privacy in the United States.

## **HIPAA Privacy Rule**

The specific section of HIPAA (effective 2003) that includes both the privacy protections and the Right of Access at 45 CFR § 164.524.

## **Right of Access**

Your federal right under 45 CFR § 164.524 to inspect and obtain a copy of your protected health information from any covered entity.

## **21st Century Cures Act**

The 2016 federal law that directed HHS to write rules preventing healthcare organizations from interfering with the electronic flow of health information. Passed the House 392-26, the Senate 94-5.

## **Cures Act Final Rule**

The 2020 ONC regulation implementing the information blocking provisions. Citation: 45 CFR Part 171.

## **Information Blocking**

Any practice by a provider, EHR vendor, or health information network that knowingly interferes with access, exchange, or use of electronic health information. Eight narrow exceptions are spelled out in the regulation.

## **PHI — Protected Health Information**

Any information about your health, healthcare, or payment for healthcare that identifies you (or could identify you).

## **EHI — Electronic Health Information**

The broader Cures Act term for any PHI maintained electronically.

**EHR — Electronic Health Record**

The digital version of your medical chart. Common brand names: Epic, Cerner, athenahealth, eClinicalWorks.

**CEHRT — Certified EHR Technology**

An EHR system certified by ONC as meeting standards for patient access, including View, Download, and Transmit. Records delivered via CEHRT must be no-cost.

**View, Download, and Transmit (VDT)**

The Certified EHR functions that allow patients to see, download, and send records electronically. Records delivered via VDT must be provided at no cost.

**DICOM — Digital Imaging and Communications in Medicine**

The standard file format for medical imaging — MRI, CT, X-ray, ultrasound. Request your imaging studies in DICOM format to get the actual image files, not just the radiologist's report.

**HIM — Health Information Management**

The department within a hospital responsible for medical records and request processing.

**MRN — Medical Record Number**

A unique identifier a hospital assigns to your chart. Helps the HIM department locate your records faster.

**OCR — Office for Civil Rights (HHS)**

The federal agency at HHS that enforces HIPAA. Not to be confused with optical character recognition.

**ONC — Office of the National Coordinator for Health IT**

The federal office responsible for the Cures Act's information blocking rule and EHR certification.

**OIG — Office of Inspector General (HHS)**

The federal agency that investigates information blocking complaints and imposes civil monetary penalties under the Cures Act.

**Personal Representative**

Under HIPAA (45 CFR § 164.502(g)), a person legally authorized to make healthcare decisions for another individual. Same access rights as the patient.

**Psychotherapy Notes**

A therapist's private process notes kept separate from the medical record. Subject to stronger HIPAA protections than other records.

**Preemption**

The legal rule that when state and federal law conflict, one controls. For medical records: whichever law gives the patient **more** rights wins.

**Cost-Based Fee**

The only kind of fee a provider can legally charge under HIPAA. Limited to actual labor of copying, actual supplies, and actual postage. **Not** retrieval time, search, or review.

**Resolution Agreement**

The formal settlement between OCR and a healthcare organization that violated HIPAA. Includes corrective actions and financial penalty. All public.

**Civil Monetary Penalty (CMP)**

A financial penalty imposed by HHS for HIPAA violations or information blocking. Right of Access Initiative penalties have ranged from \$16,500 to over \$200,000.

**SF-180 — Standard Form 180**

The federal form used to request military service records, including military medical records, through the National Archives.

**C-File — VA Claims File**

The complete file the VA maintains on each veteran's disability claim. Includes medical records, decisions, evidence, and correspondence.

## Where to start, if you're starting today

1. Write down every doctor, hospital, lab, pharmacy, and insurer that has ever held your records. You won't remember everyone the first time. That's fine.
2. Pick three. The current primary care doctor. The most recent hospital. The pharmacy you use most.
3. Try the portal first. If they have one, log in. Download what you can.
4. If the portal isn't enough, use Template 1 or Template 2 from this guide. Fill in your information. Sign. Send.
5. Mark your calendar. Thirty days from the day you sent the request.
6. When the records arrive, read them. Cross-reference. Catch the mistakes. Keep them in a folder so you can give them to the next doctor without re-requesting.

**The law was written for you. The records are yours. The system,  
imperfect as it is, will work for you if you ask it to.**

— T H E E N D O F T H E G U I D E

**That's the whole guide. Welcome to knowing your count.**

# About MyChartCount

MyChartCount is a free public service operated by Synergyix Healthcare Solutions, There is no paywall, no signup, no email collection, and no upsell. The site exists because the federal right to your medical records is one of the most underused rights in American healthcare, and somebody has to say it plainly.

If this guide helped you, the best thing you can do is share it with someone else who needs it. The link is [mychartcount.com/guide/](https://mychartcount.com/guide/). Print it, forward it, post it. The more Americans who know about their federal right of access, the more the system works the way it was designed.

Find the complete guide online:

[mychartcount.com/guide/](https://mychartcount.com/guide/)

Including 14 downloadable letter templates in Word and PDF format.





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