

Attachment A

Procedure for Handling Patient Right to Request Restrictions

A. For Restriction on Disclosures of PHI to Health Plans:

I. Process for Allowing Patient Request for Restriction on Disclosures of PHI to Health Plans:

1. Patients must complete and sign the Request: Restrict Disclosure to Health Plan/Termination Form HCH 2448 (see attachment to this procedure).
2. Payment out of pocket, in full, of the estimated total charges for the restricted services or items must be made at the time of service in order for UConn Health to accept the restriction.
3. Should failure to collect payment in full occur, UConn Health reserves the right to terminate the agreement pursuant to the procedure outlined in this policy below under the **Process for Termination of Restrictions** section.
4. The Form “Request: Restrict Disclosure to Health Plan/Termination”(HCH 2448) is **faxed immediately** upon receipt of the individual’s signature to the applicable Health Information Management and Billing Offices indicated on the form.
5. The applicable IDX visit is updated to reflect a “Restricted Service” value. Both Dental Clinic and University Dentists will set this value manually in the Axium System.
6. Through the IDX interfacing of the restricted services indicator, LCR/Invision, Nextgen, and EHIM will set a restricted service indicator on the patients’ medical record for the applicable visit. Dental Records will set this restriction manually in the Axium system.
7. All applicable billing offices will assure that no insurance billing takes place for those specific services designated as restricted on the Form “Request: Restrict Disclosure to Health Plan/Termination” (HCH 2448). Services on the same day that have not been restricted will be billed according to regular processes.
8. The original signed Form “Request: Restrict Disclosure to Health Plan/Termination” (HCH 2448), is sent to UConn Health’s Health Information Management department or applicable Dental Records department for scanning or filing in the patient’s chart.

II. Process for Termination of Restrictions on Disclosures to Health Plan:

1. The original completed Form “Request: Restrict Disclosure to Health Plan/Termination” (HCH 2448) must be obtained from the Health Information Management Department or Dental Records Department.
2. The patient may terminate his or her request for a restriction by signing the Termination section of this original form.
3. Patient Financial Service or the Dental Finance Department may terminate the restriction if after 30 days the patient fails to pay for the requested restricted services in full. Notification of termination will be made via certified letter.
4. The effective date of the termination will be as follows:
 - a) Termination by the patient: the date of the patient’s signature on the Termination section of the Form OR
 - b) Termination by Patient Financial Services or Dental Finance Department: 30 days from the date of the certified termination letter.
5. All necessary systems are updated to reflect the termination of the agreement by removing the restricted services indicator.
6. Prior payments made by the patient on the restricted services are refunded to the patient or applied to any self pay balance.
7. The original Form “Request: Restrict Disclosure to Health Plan” (HCH 2448) with the completed Termination Section signed is sent to the Health Information Management Department or Dental Records Department for scanning and filing in the patients chart, along with a copy of the certified letter and receipt.

B. For Exclusion from Appointment Reminders:

I. Process for Allowing Patient Request to Exclude Appointment Reminders:

1. Patients will be allowed to request to be excluded from UConn Health’s automated, verbal and written appointment reminders.
2. Patients may be excluded from one or more reminder types, but exclusion will apply to all appointments at UConn Health, regardless of provider or department.
3. Documentation of the restriction is made in IDX by updating the exclusion value in the applicable reminder field. Dental Clinic and University Dentists will document the restriction by checking the appropriate box in the Axium system.

4. IDX or Axium may be updated at any time the patient requests to be excluded.
5. The appointment reminders should be updated every six months.

II. Process for Termination of Exclusion for Appointment Reminders:

1. The patient may terminate his/her request to be excluded from appointment reminders by notifying the physician's office either in writing or verbally.
2. Documentation of the termination will be made by removing the "Y" designation indicating restriction in the IDX system. Dental Clinic and University Dentist will make the appropriate designation in the Axium system.

C. I. Process for allowing patient the right to request refusal to release psychiatric information:

1. Patients will be allowed to request this restriction whenever they ask for it.
2. When patients request this restriction, Form HCH 2589 "Refusal to Consent to Release of Psychiatric Information" will be provided to the patient to complete.
3. The signed form is retained in the patient's medical record.