

UConn HEALTH

POLICY NUMBER 2003-23

May 19, 2015

POLICY: FAXING OF PROTECTED HEALTH INFORMATION (Privacy & Security of Protected Health Information (PHI))

PURPOSE:

To protect the confidentiality and privacy of patient information when this information must be released via facsimile rather than by hand deliver or mail.

SCOPE:

Applies to all UConn Health workforce:

- Employees (including faculty and staff)
- Volunteers
- Students and residents
- Temporary staff
- Agency and contracted staff
- Credentialed staff
- Members of the Board of Directors

POLICY STATEMENT:

UConn Health will protect the confidentiality of Protected Health Information (PHI) when transmitting or receiving information via facsimile (fax).

I. GUIDELINES FOR FAXING PHI

1. Limit faxing to situations where regular mail or personal delivery is not possible or practical.
2. Sensitive PHI such as mental health, drug or alcohol treatment, sexually transmitted diseases, HIV or other highly personal information should not be faxed unless needed urgently for treatment reasons.
3. Electronic faxing (directly from computer) follows same guidelines as paper fax.
4. Fax machines are to be located in reasonably restricted access areas, not accessible to anyone not authorized to access protected health information.
5. Fax cover sheets must accompany each fax (internal or external) to include UConn Health confidentiality statement. (see attachment)
6. To the extent practicable, fax machines should be pre-programmed with frequently used destination numbers.
7. Departments utilizing preprogrammed fax machines or clinical applications with auto-fax technology are responsible to test fax numbers initially and audit periodically thereafter to ensure accuracy of pre-programmed fax numbers.

II. SENDING FAX

1. All disclosures made via fax will conform to the UConn Health policies on [Authorization for Release of Information](#), and [Verification of Individuals/Entities](#).
2. Material to be faxed should be limited to the minimum necessary (unless required for treatment) to meet the requester's needs, consistent with the [Minimum Necessary Data](#) policy
3. The fax number of the recipient should be verified in the digital display of the fax machine prior to pressing send. If the fax machine does not have digital display, make a note on the fax cover sheet for the recipient to call to confirm receipt or use the fax transmission confirmation report to verify the fax was transmitted to correct destination.
4. For any faxes being sent outside of UConn Health, dial "9" prior to the fax number.

III. AUTHENTICATION, ERROR REPORTING & MISDIRECTED FAX

1. All error messages should be investigated and corrected.
2. If a fax transmission fails to reach the intended recipient, verify the fax number again and re-send the fax.
3. In the event the sender realizes or is informed by a recipient that they have misdirected a fax:
 - a. The sender should contact the recipient, as necessary, and request the recipient return the hard copy fax to UConn Health via fax or regular mail and confirm that the recipient will destroy the documents (e.g. shred) or completely delete a fax received electronically (e.g. delete and empty the "Deleted Items" folder).
 - b. If it is not feasible to identify the recipient, the misdirected fax number should be recorded. Misdirected faxes external to UConn Health are recorded as disclosures on the Protected Health Information Disclosure Tracking Log for the patient whose PHI was disclosed (see [Accounting of Disclosures of PHI](#) policy).
 - c. Whether the unintended recipient is identified or not, the sender must notify their supervisor and the HIPAA Privacy Office of this potential breach incident consistent with the [Breaches of Privacy and Security of PHI](#) policy.
4. In the event a misdirected fax is received at UConn Health that has PHI in it, the person receiving the fax should attempt to identify who the fax was intended for. Whenever possible, the intended party should be contacted to assure that the PHI gets to the proper party. If this is not possible, contact may be made with the UConn Health Privacy Officer to resolve the matter and get the fax to the intended party. The sender should be notified by telephone of any fax received in error and that UConn Health will shred the contents. Place the material in a secured shred bin.

IV. FAX RECEIPT AND DISTRIBUTION

1. Incoming faxes should be promptly removed from the fax machine. Verify that all pages of the fax have been received and are retained together.
2. The fax should be distributed to the intended recipient immediately upon receipt.

References:

[Authorization for Release of Information](#)

[Verification of Individuals/Entities Requesting Disclosures of PHI](#)

[Minimum Necessary Data](#)

[Accounting of Disclosures of PHI to Patients Upon Their Request](#)

[Breaches of Privacy & Security of PHI](#)

Attachment: Confidential Fax Cover Sheet

Tom Murphy (Signed)

5/26/15

Thomas Murphy
Chief Information Security Officer

Date

Iris Mauriello (Signed)

5/22/15

Iris Mauriello
Compliance Integrity/Privacy Officer

Date

Andrew Agwunobi (Signed)

6/9/15

Andrew Agwunobi, M.D., M.B.A.
Interim Executive Vice President for Health Affairs

Date

New Policy: 4/14/03
Revised 4/15/04, 3/28/05, 5/19/15