PURPOSE:
To safeguard Protected Health Information (PHI) in paper form from inadvertent disclosure to unauthorized recipients in accordance with the Health Insurance Portability and Accountability Act of 1996 and the associated regulations (HIPAA) and the Health Information Technology for Economic and Clinical Health Act (HITECH).

POLICY STATEMENT:
Paper documents containing PHI must be reviewed prior to disclosure to ensure delivery to the intended recipient.

When the identity of the intended recipient is unknown to UConn Health, UConn Health will confirm such person’s identity and authority to receive or access the patient’s health information prior to disclosure in accordance with Policy 2003-20 Verification of Individuals Requesting Protected Health Information.

DEFINITIONS:
Privacy Definitions

PROCEDURES/FORMS:
Procedure for Policy 2014-09 Hand-delivering and Mailing Paper Documents That Contain PHI

REFERENCES:
45 C.F.R. § 164.530(c) (HIPAA Privacy Rule)

RELATED POLICIES:
2003-20: Verification of Individuals Requesting Protected Health Information
2012-05: Legal Representative for Health Care Decisions

ENFORCEMENT:
Violations of this policy or associated procedures may result in appropriate disciplinary measures in accordance with University By-Laws, General Rules of Conduct for All University Employees, applicable collective bargaining agreements, the University of Connecticut Student Code, other applicable University Policies, or as outlined in any procedures document related to this policy.
APPROVAL:

Andrew Agwunobi (Signed) 6/2/2021
UConn Health Chief Executive Officer

Kiki Nissen (Signed) 6/2/2021
Administrative Policy Committee Vice-Chair

Janel Simpson (Signed) 6/2/2021
Administrative Policy Committee Chair

POLICY HISTORY:

New Policy Approved: 11/18/14
Revised: 4/14/15, 6/2/21