Procedures for Policy 2014-09 Hand-delivering and Mailing Paper Documents That Contain Protected Health Information (PHI)

The following procedures apply to documents containing PHI that are hand-delivered or mailed. Staff will rely on reasonable judgment, care, and the guidelines in these procedures to ensure delivery to the correct recipient.

A. **Mailing Documents Containing PHI**

When preparing to mail documents containing PHI:

1. Review all pages of the document to ensure that each page pertains to the correct patient.
2. Confirm that the intended recipient is authorized to receive the information being sent. If applicable:
   a. Consider special rules applicable to minors. See UConn Health Policy 2012-05: Legal Representative for Health Care Decisions.
   b. See UConn Health Policy 2003-20: Verification of Individuals Requesting Protected Health Information.
3. Assure the mailing address is the correct address for the intended recipient.
4. When using an envelope with a window, make sure that PHI is not visible through the window.

B. **Hand-delivering Documents Containing PHI (e.g., After Visit Summary)**

When preparing to hand-deliver paper documents that contain PHI to a patient or other individual:

1. Prior to handing over the document, review all pages to ensure that each page pertains to the correct patient.
2. If handing to an individual other than the patient or a family member or other individual involved in the patient’s care or payment for care, confirm that the individual is authorized to receive the patient’s PHI. See UConn Health Policy 2003-20: Verification of Individuals Requesting Protected Health Information.¹
   a. If handing to the parent or guardian of a patient who is a minor, consider special rules applicable to minors. Minors have privacy rights with respect to certain types

¹ For disclosures of PHI to a friend or family member involved in the patient’s care or payment for care, see UConn Health Policy 2003-25: Uses and Disclosures of PHI Involving Family, Friends, and Others.
of PHI such that parental access requires the minor’s permission. See UConn Health
Policy 2012-05: Legal Representative for Health Care Decisions.

C. Delivery to the Wrong Recipient

If a Workforce member becomes aware that a document was delivered to the wrong
recipient, the Workforce member should:

a. Ask the recipient to confirm that they will either destroy the documents (e.g. shred)
or return them.
b. Ask the recipient to confirm that they have not and will not further disclose, print,
copy or share the document.
c. If the disclosure was made to another patient, ensure that the patient whose
documents were disclosed in error did not also receive documents in error.
d. Ensure that all recipients receive their correct documents.
e. Notify a supervisor and immediately report the incident to the Privacy Office at 860-
679-7226 or privacyoffice@uchc.edu.