



POLICY TYPE:

Corporate

Divisional

EFFECTIVE DATE:

March 1, 2007

INITIAL APPROVAL DATE:

March 1, 2007

NEXT REVIEW DATE:

May 2017

POLICY NUMBER:

5503

REVISION APPROVAL DATE:

3/07, 3/08, 3/09, 1/10, 12/10, 3/11, 5/12, 9/13, 4/14, 11/14, 3/15, 1/16

APPLIES TO PRODUCT TYPE:

Medi-Cal  CMC

PAGE:

1 of 2

POLICY APPLIES TO:

All Divisions and Departments

CLASSIFICATION SERIES:

Compliance

SUBJECT:

## HIPAA Fax Policy

**Policy:** It is the policy of Community Health Group (CHG) that all personnel must strictly observe specific standards relating to facsimile communications of protected health information.

### Assumptions:

Often CHG's personnel or organizations with which CHG does business will have a real or a perceived need to transmit or receive confidential medical information by telefacsimile rather than by a slower method, such as mail.

Personnel could mis-send faxes to unauthorized recipients, faxes could be intercepted or lost in transmission, or CHG may not receive a fax intended for it because of one of these or other reasons. Thus, the potential for breach of patient confidentiality exists every time someone faxes such information.

### Procedure:

1. Personnel may fax protected health information as allowed by law.
2. CHG, its officers, agents, and employees may send health information by facsimile when the original record or mail-delivered copies will not meet the needs of immediate patient care.
3. Personnel may transmit protected health information, claims records, and other member records by facsimile when needed for patient care or required by a third-party payer for ongoing certification of payment for a hospitalized patient.
4. Personnel must limit information transmitted to only the necessary information per the requester's needs.
5. The cover page accompanying the facsimile transmission must include the following confidentiality notice: Confidential faxes must be marked accordingly.

"This fax communication that you have received may contain Protected Health Information (PHI) as defined by The Health Insurance Portability and Accountability Act of 1996 (HIPAA). Federal law mandates that you not use or disclose the information contained herein in any way that will compromise the privacy, security or confidentiality of the individual to whom the information pertains. If this fax communication has been misdirected to you, please notify us at our Compliance Hotline at 1-800-651-4459 and refrain from discussing the contents of the document with anyone else."

6. Personnel must make reasonable efforts to ensure that they send the facsimile transmission to the correct destination. Personnel must preprogram frequently used numbers into the machine to prevent misdialing errors. For a new recipient, the sender must verify the fax number before sending the facsimile and, unless the transmission is intended for a recipient who is being sent the information for purposes of treatment, payment, or health care operations, verify the recipient's authority to receive confidential information. After faxing protected health information to a non-preprogrammed phone number, the employee should retrieve the fax confirmation sheet from the fax machine and confirm the correct phone number was used.
7. When setting up a fax machine, consideration must be given to the security that the site affords in regards to safeguarding protected health information.



- 8. Each department is responsible for ensuring that incoming faxes are properly handled, not left sitting on or near the machine, but rather are distributed to the proper recipient expeditiously while protecting confidentiality during distribution, as by sealing the fax in an envelope or other reasonable means.
- 9. Personnel must report any misdirected faxes sent by CHG that contain protected health information to the Privacy Officer.
- 10. If an individual becomes aware that a fax was sent to the wrong fax number, the person will immediately attempt to contact the recipient by fax or telephone and request that the faxed documents, and any copies of them, be immediately returned to CHG or destroyed. The individual will also notify the HIPAA Privacy Officer immediately of the mis-directed fax.

**Enforcement**

All supervisors are responsible for enforcing this policy. Employees who violate this policy are subject to discipline up to and including termination from employment in accordance with CHG's "HIPAA Sanction" policy #5502.

Access Privileges To:  All  \_\_\_\_\_

Regulatory: Health Insurance Portability and Accountability Act of 1996 (HIPAA) 42 CFR § 422.118

NCQA:

Attachments:

Policy Status:  Signed (Signature on File)  Active Draft  Policy In Development

Approved By: Signature: \_\_\_\_\_

Department Head: Chief Compliance & Regulatory Affairs Officer

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Division Chief: Chief Executive Officer

Date: \_\_\_\_\_