# INDIANA UNIVERSITY

# HIPAA–PR03
# Confidential/Alternative Communication Requests for IU's Health Plans

**Effective:** September 1, 2016
**Last Updated:** September 1, 2016

**Responsible University Office:**
*HIPAA Privacy and Security Compliance Office*

**Responsible University Administrator**
*Vice President for University Clinical Affairs*

**Policy Contact:**
*University HIPAA Privacy Officer*

## Scope

This procedure applies to any IU Humans Resources, workforce who are involved in the management of the IU's Health Plans. This procedure is in accordance with the Privacy Rule of the Health Insurance Portability and Accountability Act (HIPAA.

## Reason for Procedure

The Health Information Portability and Accountability Act (HIPAA) Privacy regulations require that a health plan must permit individuals to request and must accommodate reasonable requests by individuals to receive communications of protected health information from the health plan by alternative means or at alternative locations, if the individual clearly states that the disclosure of all or part of that information could endanger the individual.

This procedure defines the process for complying with an individual's reasonable request(s) for alternative communications.

# Definitions

See HIPAA Glossary for a complete list of terms.

# Statement

A. Individuals have the right to request alternative means of communications from IU's Health Plans in order to ensure the safety of the individual.

B. If alternative means of communications are not requested, IU's Health Plans may freely communicate with the individual through the telephone number and address provided by the individual.

IU's Health Plans are responsible for complying with this procedure or for developing a comparable operating procedure for addressing requests for confidential communication.

# Procedures

A. Requests for alternative means of confidential communications <u>must</u> be in writing and must contain a statement that disclosure of all or part of the information to which the request pertains could endanger the individual.

B. IU's Health Plans should accommodate all reasonable requests to receive confidential communications by alternative means or at alternative locations if the individual clearly states that the disclosure of all or part of that information could endanger the individual.

C. Reasonable requests include (but are not limited to) using alternative telephone numbers, alternative addresses, refraining from leaving messages on answering machines, and refraining from mailing information to the individual. Unreasonable requests are those that would be too difficult technologically or practically for IU's Health Plans to accommodate.

D. IU's Heath Plans and/or designated staff will be responsible for receiving, processing, and responding to requests for confidential/alternative communications and for maintaining a copy of the request in the individual's record.

   1. If the request is for an alternative address, telephone or e-mail, the designated staff member may approve it at the time of request.

   2. Agreed upon requests for alternative communication must be communicated to all who may be involved in the use or disclosure of the individual's PHI which includes any business associates.

   3. If the request for alternative communication is denied, the reason for the denial must be documented on the request form.

   4. The designated staff member will contact the patient to inform them the request was denied and the reason for the denial.

5. IU's Health Plans will document the acceptance or denial of an individual's request for confidential/alternative communications and maintain all documentation relating to the request in the individual's record.

# Related Information

**HIPAA Privacy Rule**

45 C.F.R. §164.522

# History

04/06/2015      New procedure

09/01/2016      Finalizedl procedure