
FACSIMILE TRANSMISSION OF RESTRICTED INFORMATION

PURPOSE

To establish a procedure for faxing Restricted Information that safeguards confidentiality and meets applicable state and federal laws and regulatory standards.

This policy applies to the UCLA Health System and David Geffen School of Medicine at UCLA (hereafter referred to as "UCLA Health").

DEFINITIONS

"Protected Health Information" or "PHI" is any individually identifiable health information, in any format, including verbal communications, regarding a patient created as a consequence of the provision of health care. "Individually identifiable" means that the health or medical information includes or contains any element of personal identifying information sufficient to allow identification of the individual, such as the patient's name, address, electronic mail address, telephone number, or social security number, or other information that, alone or in combination with other publicly available information, reveals the individual's identity. PHI includes patient billing and health insurance information and applies to a patient's past, current or future physical or mental health or treatment.

"Electronic Protected Health Information" or "ePHI" is PHI that is transmitted by electronic media or is maintained in electronic media. For example, ePHI includes all data that may be transmitted over the Internet, or stored on a computer, a CD, a disk, magnetic tape or other media.

"Personal Information (PI)" as used in this policy is an individual's first name or first initial and last name combined with any one of the following:

- (1) social security number,
- (2) driver's license number or California identification card number,
- (3) account number, credit, or debit card number, in combination with any required security code, access code, or password that would permit access to an individual's financial account,
- (4) medical information, or
- (5) health insurance information.

"Medical information" means any information, in either electronic or physical form, regarding an individual's medical history, mental or physical condition, or medical treatment or diagnosis by a health care professional, and which may be in the

possession of or derived from a health care provider, health care service plan, pharmaceutical company or contractor. "Health insurance information" means an individual's health insurance policy number or subscriber identification number, any unique identifier used by a health insurer to identify the individual, or any information in an individual's application and claims history, including any appeals records. Medical information and health insurance information for patients are also considered to be PHI.

"Restricted Information" (as defined by UC Policy IS-3, Electronic Information Security) describes any confidential or Personal Information that is protected by law or policy and that requires the highest level of access control and security protection, whether in storage or in transit. This includes Personal Information, PHI and ePHI as defined in this section but could also include other types of information such as research data.

"Workforce" means employees, volunteers, and other persons whose conduct, in the performance of their work for UCLA Health, is under the direct control of UCLA Health or the Regents of the University of California, whether or not UCLA Health pays them. The Workforce includes employees, medical staff, and other health care professionals, agency, temporary and registry personnel, and trainees, house staff, students and interns, regardless of whether they are UCLA trainees or rotating through UCLA Health facilities from another institution.

POLICY

The transmission of Restricted Information via facsimile (fax) is permissible in situations in which the information is required for continuity of patient care, for payment of patient accounts or other healthcare and business operations. Only the information minimally necessary to accomplish the purpose should be transmitted. Safeguards must be taken to ensure delivery to the intended recipient at a secured fax machine.

PROCEDURE

I. Receipt of Faxed Requests and Information

- A. A faxed authorization authorizing the release of patient identifiable information must meet the applicable requirements (see: Privacy Policy and Procedure No. 9412, "*Authorization to Disclose Protected Health Information ("PHI")*"). Faxed authorizations (requesting the release of PHI) should be followed by an original signed authorization as soon as possible.
- B. If possible, refrain from faxing of sensitive health information, such as that dealing with mental health, chemical dependency, sexually transmitted diseases, HIV or other highly personal information.

- C. Faxed requests for UCLA to transmit Restricted Information that do not require specific authorization (e.g., to an insurance company in order to process a claim) may be processed in accordance with University policies and procedures.
- D. Medical information received via facsimile is acceptable and can be included in the patient's medical record under the outside correspondence section.

II. Transmission of Information via Facsimile Machine

A. Cover Sheet.

A cover sheet must be used when faxing documents. The cover sheet must contain the following information:

- i. Name of the recipient of the fax;
- ii. Date;
- iii. Number of pages;
- iv. Name of sender;
- v. Phone number and address of sender; and
- vi. Confidentiality Notice (see sample below, when faxing Restricted Information that is not Health Care related, revise as appropriate).

The headline of the cover sheet should state in large bold type: "Confidential Health Information Enclosed." A statement such as the following should follow below:

"Health Care information is personal and sensitive. This is being faxed to you after appropriate authorization from the patient or under circumstances that do not require patient authorization. You, the recipient, are obligated to maintain it in a safe, secure and confidential manner. Re-disclosure without additional consent as permitted by law is prohibited. Unauthorized re-disclosure or failure to maintain confidentiality could subject you to penalties described in federal and state law."

Include at the bottom of the fax coversheet a warning such as:

"IMPORTANT WARNING: These documents are intended for the use of the person or entity to which it is addressed and may contain information that is privileged and confidential, the disclosure of which is governed by applicable law. If the reader of this message is not the intended recipient, or the employee or agent responsible to deliver it to the intended recipient, you are hereby notified that

any dissemination, distribution or copying of this information is STRICTLY PROHIBITED. If you have received this communication in error, please immediately notify us by telephone and return this original message or destroy it.”

B. Pursuant to Patient Authorization.

When releasing PHI via facsimile pursuant to a patient authorization, the fax cover sheet with documentation of the disclosed information, date and name of the employee making the disclosure should be filed in the patient’s medical record. The signed authorization from the patient or the patient’s legal representative must also be filed in the patient’s medical record.

The sample cover sheet attached as Appendix 1 may be used to generate department-specific forms.

C. Separate Fax Machine.

In order to ensure enhanced procedures for the transmission of Restricted Information via facsimile (as opposed to routine administrative information), when possible, a separate fax machine should be designated to send and/or receive Restricted Information. Care should be taken to ensure that Restricted Information is not inadvertently mixed with routine office faxes.

D. Verify Fax Number.

Reasonable steps must be taken to ensure the fax transmission is sent to the intended destination. Reasonable steps may include:

- i. Pre-programming destination fax numbers whenever possible to eliminate dialing errors;
- ii. Verifying fax numbers, including pre-programmed fax numbers on a regular basis;
- iii. Sending a test fax and confirm that the intended recipient received the fax before transmitting faxes containing Restricted Information; and.
- iv. Reminding entities to whom we frequently send faxes containing Restricted Information to notify us if their fax number changes.

E. Do Not Leave Documents Unattended.

Documents should not be left on the fax machine unattended during the transmission process and should be removed from the machine when

transmission is completed. As with other Restricted Information that arrives by mail or by other means, care should be taken to see that faxes that contain Restricted Information are placed in a secure/confidential place when they are delivered, and not left in an in-box that is in full view of passers-by.

F. Transmission Confirmation.

Make sure your fax machine prints a confirmation of each outgoing transmission and require machine operators to make certain the intended destination matches the number on the confirmation, and staple the confirmation to the document that was faxed.

G. Errant Transmissions.

Should you become aware of an errant transmission, contact the recipient of the transmission to verify receipt and/or ask that the materials be returned or destroyed. If an errant transmission has compromised a patient's right to privacy, the incident must be reported immediately to the Privacy and Information Security Offices (PrivacyInfoSec@mednet.ucla.edu, (see: HS Policy 9459, "*Privacy and Security Incident Reporting*")

H. Security.

As with all other paper documents that contain Restricted Information, make sure that faxes that contain Restricted Information are handled, stored and/or disposed of in a secure manner.

I. Employee Training.

All employees shall be trained upon hire and periodically thereafter as to UCLA Health's policies and procedures for using the fax machine to transmit and receive Restricted Information.

III. **Electronic Fax**

A. Any equipment or other methods for transmitting faxes over the Internet must be approved before purchase by the Privacy and Information Security Offices (PrivacyInfoSec@mednet.ucla.edu).

B. Fax messages transmitted electronically over the Internet must use approved encryption methods or other security measures approved by the UCLA Health System Chief Information Security Officer. If emails or web communications are used as part of an electronic fax solution, they should be encrypted.

- C. There should be a process in place to ensure the timely deletion of fax accounts when workforce members terminate or change job duties.
- D. Systems should have the ability to log fax transmissions and provide reports on fax activity.
- E. For external providers of electronic fax services that will involve UCLA Health System PHI, the above conditions apply as well as the conditions below:
 - i. A HIPAA Business Associate Agreement must be signed (see: Policy HS 9430, "Business Associates"). Please consult with the Privacy and Information Security Offices (PrivacyInfoSec@mednet.ucla.edu) regarding Business Associate Agreements for external fax services
 - ii. UCLA Health must have the ability to manage the fax accounts of workforce members to enable the timely deletion of accounts.

IV. Questions

Any questions on faxing Restricted Information should be referred to the Privacy and Information Security Offices (PrivacyInfoSec@mednet.ucla.edu).

V. Enforcement

Failure to follow any provisions of this policy may result in disciplinary action, up to and including termination.

REFERENCES

Health Insurance Portability and Accountability Act, 45 CFR 160-164
California Medical Information Act, California Civil Code Section 56 *et seq.*
Information Practices Act of 1977, California Civil Code Sections 1798.29 and 1798.82
California Health and Safety Code Sections 1280.15 and 130203
California Lanterman-Petris Short Act ("LPS Act"),
UCLA Policy 455: UCLA Email Policy and Guidelines

CONTACT

Chief Privacy Officer, Compliance Office
Chief Information Security Officer, Compliance Office

REVISION HISTORY

Approved: April 8, 2003; February 22, 2006
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March 31, 2011

Formerly Policy No. 9451 "Facsimile Transmission of PHI"

APPROVAL

Health Sciences Enterprise Compliance Oversight Board
Approved 12/11/2010

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APPENDIX 1

Department logo and address

Date: _____

No. of pages _____
(Including Cover Sheet)

“Confidential Health Information Enclosed”

<p>To: _____ _____</p> <p>Phone: _____</p> <p>Fax: _____</p>	<p>From: _____ _____</p> <p>Phone: _____</p> <p>Fax: _____</p>
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<p>REMARKS:</p>

Health care information is personal and sensitive. This is being faxed to you after appropriate authorization from the patient or under circumstances which do not require patient authorization. You, the recipient, are obligated to maintain it in a safe, secure and confidential manner. Re-disclosure without additional consent as permitted by law is prohibited. Unauthorized re-disclosure or failure to maintain confidentiality could subject you to penalties described in federal and state law.

IMPORTANT WARNING: These documents are intended for the use of the person or entity to which it is addressed and may contain information that is privileged and confidential, the disclosure of which is governed by applicable law. If the reader of this message is not the intended recipient, or the employee or agent responsible to deliver it to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this information is **STRICTLY PROHIBITED**. If you have received this communication in error, please immediately notify us by telephone and return this original message or destroy it.