Office of the Commissioner

HIPAA: Right to Alternative or Confidential Communications

Policy #: DHHS-01-15 **Issue Date:** April 14, 2015

I. SUBJECT

HIPAA: Right to Alternative or Confidential Communications

II. POLICY STATEMENT

The Maine Department of Health and Human Services (the Department) recognizes and supports the right of individuals to receive communications regarding their protected health information (PHI) in a means and location that the individual feels is safe from unauthorized access. We must permit individuals to request communication of PHI or electronic PHI (ePHI) from the Department by alternative means and to alternative locations. We will accommodate reasonable requests, as required by the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule and the Health Information Technology for Economic and Clinical Health (HITECH) Act.

III. PURPOSE

This policy describes how consumers or their personal representatives may request and receive communications through confidential or alternative means and/or to alternative locations.

IV. DEFINITION

Protected Health Information is information about a patient, including demographic information that may identify a patient, which relates to the patient's past, present or future physical or mental health or condition, related health care services or payment for such services.

V. PROCEDURE

1. In general, through our registration process, a consumer may provide us with alternate or confidential contact information that we maintain in our files.

2. However, HIPAA requires that individuals be given the right to request confidential or alternate communications, and to note that right in our Notice of Privacy Practices. Therefore, if requests are made other than in our original registration process, the consumer or personal representative shall make his/her request in writing to the [Department], using our request form.

3. We will not seek an explanation for the request.

4. The Minimum Necessary standard still applies when PHI is shared at the patient's direction, whether via telephone, fax, US Post or other means. We discourage the use of email, however HITECH mandates that we electronically transmit the patient's ePHI to a specifically designated location if requested by the patient. No email will be sent from the Department without the patient first signing our Authorization and filling out the Email Request section acknowledging the inherent insecurity of email as a means of communication.

5. Some examples of reasonable requests include:

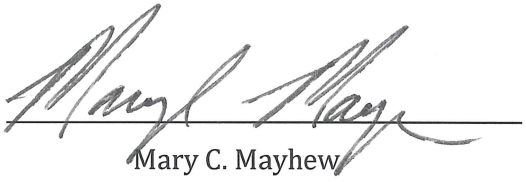
   a. Request that information be mailed in a sealed envelope rather than on a postcard.
   b. Request to receive mail at a post office box or office rather than a home address.
   c. Request to receive a telephone reminder or message at the office or on a cell phone rather than to a home phone.

6. Any questions regarding uses or disclosures of PHI in any format should be directed to the Office Privacy/Security Liaison, the Director of Healthcare Privacy or the General Counsel.

VI. DISTRIBUTION

All hospital, OMS and HIPAA-covered entity Staff (OFI staff involved in OMS/MaineCare benefits determinations or other MaineCare-related activities, Public Health Nursing, HETL, OADS Case Managers and others involved in MaineCare waiver determinations or services) via e-mail and posting on the DHHS Intranet.

April 14, 2015
Date



Mary C. Mayhew
Commissioner