Administration	Policy 7.4
Confidential Communications Request	Effective Date: May 1, 2016 Revised Date: August 2, 2017
References: <u>http://www.hhs.gov/ocr/hipaa</u> HSC HIPAA website http://www.ttuhsc.edu/hipaa/policies_procedures.aspx	

Policy Statement

Texas Tech University Health Sciences Center (HSC) recognizes that individual rights are a critical aspect of maintaining quality care and service, and is committed to allowing individuals to exercise rights under the HIPAA Privacy Rule, and other applicable federal state and/or local laws and regulations. To support this commitment, HSC will maintain and update, as appropriate, written policies and procedures to provide guidance on employee and organizational responsibilities regarding the rights of patients to identify/authorize individuals, telephone numbers, email addresses to receive <u>verbal</u> health information and/or to use for leaving messages regarding appointments and other general information regarding TTUHSC.

Scope and Distribution

This policy applies to all health care clinical service areas owned and/or operated by TTUHSC. It does not apply to inmates seen or treated by TTUHSC.

Definitions

Refer to <u>HPP 1.1</u> for Glossary of HIPAA Terms

See Old/New HIPAA Policy Number Cross Reference Chart

Procedure

Patients will complete the TTUHSC <u>Confidential Communications Request</u> (CCR) form at their initial visit to identify individuals to whom the patient is granting permission to receive verbal protected health information (PHI) regarding the patient. Patients are not required to re-submit the CCR form unless they are requesting changes to their information or the form has been updated.

Medical providers who are involved in the patient's care are not listed on this form.

Generally detailed PHI including but not limited to lab and radiology results are NOT to be released over the telephone even if disclosure is permitted or authorized due to our concern for the patient's privacy. Departments may release selected portions of the patient's medical record directly to the patient or authorized individual as requested by the provider (Ambulatory Care Policy 5.09 *Release of Health Record Information).*

Texas Tech University Health Sciences Center HIPAA Privacy Policies

When requesting patient information, including appointment information, the identified individual(s) must be listed on the patient's Confidential Communications Request Form and provide at least one of the following in order to verify relationship with the patient: patient's address, patient's date of birth, last four digits of the patients' Social Security number. Appointment information includes disclosure of an appointment or scheduling an appointment.

Knowledge of a violation or potential violation of this policy must be reported directly to a Regional Privacy Officer, the Institutional Privacy Officer or to the employee Compliance Hotline at (866) 294-9352 or <u>Ethics Point - Texas Tech University</u> under HSC.

Approval Authority

The TTUHSC Privacy and Security Committee has authority for HIPAA policy approval.

Responsibility and Revisions

Questions regarding this policy may be addressed to the Regional Privacy Officer (<u>Amarillo</u>, <u>Permian Basin Lubbock</u>), the <u>Institutional Privacy Officer</u>, or the <u>Institutional Compliance Officer</u>.

This policy may be amended or terminated at any time.