I. Policy Summary:
The Privacy Rule of The Health Insurance Portability and Accountability Act of 1996 (HIPAA) mandates certain patient rights including the right to request confidential communications of protected health information (PHI).

II. Definitions:
“Data Steward for PHI” is any UCR Health workforce member who receives and reviews requests for PHI, provides access to or releases PHI as permitted or required by HIPAA, prevents access to or disclosure of PHI as permitted or required by HIPAA, or serves as UCR Health’s liaison to the patient when the patient wants to exercise their Patient Rights provided by HIPAA or state law.

“Confidential Communications Request” is defined as a patient’s right to request in writing an alternate means to communicate protected health information (PHI) in written, electronic, or oral formats.

“Protected health information” or “PHI” is any individually identifiable health information regarding a patient’s medical or physical condition or treatment in any form created or collected as a consequence of the provision of health care, in any format including verbal communication.

“Notice of Privacy Practice (NPP)” is the document that explains to patients their privacy rights as required by HIPAA and provides the patients with Notice as to how the University of California uses and discloses patient information.

III. Policy:
UCR Health must permit individuals to request alternative means of communication with them regarding their PHI or to communicate with them at alternative locations. For example, the patient may request contact via an alternative phone number such as a cell phone, address, and electronic communications such as e-mail or fax.

UCR Health cannot require the individual to explain the reason for the request.
Requests for alternative means of communication must be in writing to University of California Riverside Health Correspondence, Health Information Management Department, 900 University Avenue, Riverside, California 92521 with specific instructions as to location, address or fax number and must include the date and patient’s signature.

When the requests are for mailed communications, other than standard first class mail, the patient must provide payment in advance for all costs of mailing to one or more alternative locations (e.g., FedEx, express mail, etc.).

The responsible individual who has received the request should maintain a record of all requests, and maintain a copy of the response.

UCR Health staff and/or data stewards, regardless of a patient’s right to request confidential forms of communication of PHI, should make it routine practice to not send a patient’s PHI, i.e.: test results to an unsecured location. When contacting the patient by phone staff must utilize the Minimum Necessary amount of information for the purposes of contacting the patient. All e-mail communication with the patient must be through a HIPAA compliant secure Electronic Medical Record System.

IV. Responsibilities: N/A

V. Procedures:

A. All Data Stewards: Information Desks, Ambulatory Site Operators, All Ambulatory Staff Registration Personnel and Health Information Management Personnel.

1. Upon initial appointment to UCR Health Ambulatory Practice Sites, Front Office/Registration personnel will provide the HIPAA Notice of Privacy Practices (HIPAA NPP) to the patient, obtain an acknowledgement form and file the acknowledgement in patient’s medical record and/or record acknowledgement in the electronic health record.

2. Once per year thereafter, the Ambulatory Front Office registration staff will be responsible for providing the HIPAA NPP to the patient and assure that the patient sign the Acknowledgement form.

B. Patient/Personal Representative

3. Within the HIPAA NPP, the patient/personal representatives have the right to request that UCR Health communicate about medical matters in a certain way or at a certain location.

4. The patient must request confidential communications in writing to University of California Riverside Health Correspondence, Health Information Management Department, 900 University Avenue, Riverside, California 92521.
C. Ambulatory Practice Site Front Office/registration Staff

5. Receives “Request for Confidential Communications.”

6. Records the date that the Request is received and places a copy in the patient’s medical record for future reference and forwards a copy to the Health Information Management Department for future reference.

7. The information in the Request for Confidential Communications will be updated as requested by the patient.

VI. Forms/Instructions: N/A

VII. Contacts:

<table>
<thead>
<tr>
<th>Unit</th>
<th>Title</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Compliance</td>
<td>Compliance and Privacy Officer</td>
<td>(951) 827-4672</td>
</tr>
<tr>
<td>Compliance</td>
<td>Privacy Analyst</td>
<td>(951) 827-7672</td>
</tr>
</tbody>
</table>

VIII. Related Information:
- CFR 164.522
- Notice of Privacy Practice Procedure

IX. Frequently Asked Questions: N/A

Approval(s):

James R. Herron  
Compliance and Privacy Officer  
School of Medicine