

Great Rivers Behavioral Health Administrative Services Organization

Policy Title:	Individuals Right to Confidential Communications	Policy No. 5014.00
Category:	HIPAA Privacy & Security	Date Adopted: 02/14/2020 Date Revised: Date Reviewed:
Reference:	Washington Health Care Authority Contract with Great Rivers Behavioral Health Organization; 45 CFR 164.522	

Policy:

- 1.1. Since the medical records containing PHI are held in the offices of each agency providing services, all requests for restriction of the uses and disclosures will be referred to the Privacy Officer of the appropriate agency. They will be subject to the applicable Great Rivers Behavioral Health Administrative Services Organization (Great Rivers BH-ASO) policies and procedures.
- 1.2. Great Rivers BH-ASO and their providers will consider a Client's request for confidential communications between Great Rivers BH-ASO or the provider and the Client upon request for same, for example, when Client is requesting services at a Great Rivers BH-ASO contracted-provider.
- 1.3. The provider will document the alternative communication request, method of contact, and the approval in an appropriate place in the individual's medical record. It will be the provider policy to grant reasonable requests. Reasonableness will be judged by the administrative difficulty of complying with the request.
- 1.4. The provider will not ask the Client to explain why he/she wishes to have us communicate with him/her by alternative means or to alternative locations.
- 1.5. The provider will not be able to comply with the Client's request unless he/she has provided complete information to enable communication with him/her – i.e., a complete address or other method of contact.
- 1.6. The provider will provide adequate notice of the request to those employees who may need to contact the Client by flagging the medical record and, where possible, other Client databases.
- 1.7. Documentation retention requirements include:
 - 1.7.1. Policies and procedures for confidential communications of PHI
- 1.8. Other policies and procedures to review that are related to this policy:
 - 1.8.1. Notices of Privacy Practices;
 - 1.8.2. Administrative requirements – documentation

Procedure:

- 2.1. Other Individual Rights – Confidential Communications (Between Provider and Client)
 - 2.1.1. The Client's right to confidential communications is explained in the Notice of Privacy Practices.
 - 2.1.2. Support Staff will ask at the time of the initial Request for Services, for each separate episode of care, if Client wishes to request an alternative method of contact by Great Rivers BH-ASO staff.

- 2.1.3. If confidential communication is requested, the request and approval should be noted on the Client's Request for Services and in any information /demographic form ("face sheet") located at the front of the record or in the designated field in the electronic medical record. The following information will be included with the demographic information in the medical record confirming whether or not:
 - 2.1.3.1. Confidential communication is being requested;
 - 2.1.3.2. An alternative address has been provided to be used for contact from Great Rivers BH-ASO;
 - 2.1.3.3. Postcards/letters identifying this organization can be sent to the alternative address;
 - 2.1.3.4. If the address is not restricted, whether postcards or letters that identify the organization can be sent there;
 - 2.1.3.5. An alternative phone number is to be used for communication;
 - 2.1.3.6. Times of the day in which the agency is restricted from calling the Client (List times);
 - 2.1.3.7. A message may be left;
 - 2.1.3.8. The message may list the name of agency/provider;
 - 2.1.3.9. A "blind message" may be left with a phone number only.
- 2.1.4. Approval for a confidential alternative method of contact can only be given if the Client gives the organization adequate information to allow him/her to be contacted and makes adequate arrangements for services to be billed.
- 2.1.5. The following actions should be taken by medical records staff if a confidential alternative method of contact has been requested and approved:
 - 2.1.5.1. The outside of the paper medical record should be flagged with a sticker or form that states there are requests for confidential communication and /or restrictions on disclosures;
 - 2.1.5.2. Electronic records should have a field that flags the record as one where the Client has requested confidential communication and/or restrictions on disclosures;
 - 2.1.5.3. Any other Client database, for example the billing database, should be flagged as well on the Client contact screen and other appropriate screens;
 - 2.1.5.4. Prior to contacting the Client all employees should check one of the above to see if a flag exists. Employees who do not have access to any of the above three sources of information should not contact Clients.

POLICY SIGNATURE

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Edna J. Fund

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4/14/2020

Edna J. Fund, Chair
Great Rivers BH-ASO Governing Board

Date