

# Great Rivers Behavioral Health Administrative Services Organization

Policy Title:	<b>Handling and Disposing of Returned Mail Containing Protected Health Information (PHI)</b>	Policy No. <b>5031.00</b>
Category:	Privacy & Security	Date Adopted: 1/10/2020 Date Revised: Date Reviewed:
Reference:	45 CFR § 164.530(c)(1)(2)(i)(ii)	

## POLICY

- 1.1. Great Rivers Behavioral Health Administrative Services Organization (Great Rivers BH-ASO) will properly maintain and dispose of Protected Health Information (PHI) according to all State and Federal Regulations.
- 1.2. All returned and undeliverable mail will be handled according to the following procedures that are based on State and Federal laws and best practices.

## PROCEDURE

- 1.3. The following procedure will apply to all returned letters via US Postal mail:
  - 1.3.1. When a letter that contains PHI is returned to Great Rivers BH-ASO, it will be route to the manager in the appropriate clinical department.
  - 1.3.2. The manager, or designee, will attempt to contact the individual the letter was addressed to by phone to confirm or obtain a current mailing address. The manager will attempt to contact the individual 3 times, documenting each attempt on the returned mail log.
  - 1.3.3. If the manager, or designee, is unable to contact the individual directly, they will next reach out the behavioral health agency (BHA) for assistance in obtaining the updated address and other relevant contact information.
  - 1.3.4. If the address is obtained, Great Rivers BH-ASO will place the returned letter into a second envelope and resend it to the individual; ensuring the letter envelope from the first mailing is included in the second mailing.
  - 1.3.5. If the address cannot be obtained, Great Rivers BH-ASO:
    - 1.3.5.1. The Manager, or designee, will scan the envelope and the contents to the following folder: G:\Clinical Service Secure (PHI)\Returned Letters\2019.
    - 1.3.5.2. Each scanned document will be named according to the following convention: Last name, First Name, Date (use the stamp on the letter as the date).
    - 1.3.5.3. Letters will be reviewed by the privacy officer, or designee, to ensure it was scanned and saved prior to shredding.
    - 1.3.5.4. Letters will be dated and initialed by the privacy officer, or designee, prior to an administrative assistant placing them in the locked bin for shredding.
  - 1.3.6. All returned letters with PHI will be stored in a locked filing cabinet until they can be addressed by the appropriate clinical department manager.
  - 1.3.7. Access to the locked filing cabinet will be limited to the Privacy Officer of the BH-ASO.
  - 1.3.8. In the absence of the Privacy Officer, the Chief Clinical Officer will operate as a backup.
  - 1.3.9. The Privacy Officer will ensure that letters are given to the appropriate clinical manager, or designee, and lead for efforts to locate and resend the letters to effected individuals.
  - 1.3.10. All letters will be stored in the locking filing cabinet with the Privacy Officer when not in use or after work hours.

2.2 Monitoring

2.2.1 This policy and procedure will be reviewed by the chief clinical officer on an annual basis or sooner as needed.

POLICY SIGNATURE

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

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Date