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SECTION: ADMINISTRATION

AREA: GENERAL ADMINISTRATION

**SUBJECT: REQUEST FOR ALTERNATIVE METHOD OF COMMUNICATIONS OF
PROTECTED HEALTH INFORMATION**

SCOPE

UAMS Workforce

PURPOSE

To provide an avenue for patients to request Alternative Methods of Communications of Protected Health Information (PHI).

DEFINITIONS

Legal Representative means the person authorized by law to act on behalf of the patient, such as the parent of a minor, a court-appointed guardian or a person appointed by the patient in a Power of Attorney document.

Protected Health Information (PHI) means information that is part of an individual's health information that identifies the individual or there is a reasonable basis to believe the information could be used to identify the individual, including demographic information, and that (i) relates to the past, present or future physical or mental health or condition of the individual; (ii) relates to the provision of health care services to the individual; or (iii) relates to the past, present, or future payment for the provision of health care services to an individual. This includes PHI which is recorded or transmitted in any form or medium (verbally, or in writing, or electronically). PHI excludes health information maintained in educational records covered by the federal Family Educational Rights Privacy Act and health information about UAMS employees maintained by UAMS in its role as an employer.

UAMS Workforce means for purposes of this Policy, physicians, employees, volunteers, trainees, and other persons whose conduct, in the performance of work for UAMS, is under the direct control of UAMS, whether or not they are paid by UAMS.

POLICY

All patients or patient's Legal Representatives may request the University of Arkansas for Medical Sciences (UAMS) to use alternative methods of communication, or alternative locations to receive communications or any other information from UAMS, containing the patient's Protected Health Information (PHI). UAMS will honor requests which UAMS determines to be reasonable, and UAMS does not require the patient to disclose an explanation or reason for such request. If necessary, UAMS will require the patient to identify how payments will be made.

PROCEDURE

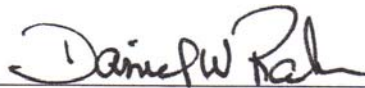
- A. **Request Form:** All requests for alternative methods of communication (e.g., communicate in writing only, rather than by phone) or requests to use alternative locations (e.g., limit communications to home, rather than to office location) to receive PHI must be submitted using the attached form signed by the patient or the patient's Legal Representative and must be referenced in the patient's record. Patient requests to simply correct or update their contact information does not require the completion of a form by the patient and is not considered a request for an alternative communication method or location.
- B. **Department-Specific Procedures:** Individual departments, divisions or other UAMS components will develop the specific procedures and process their department or division will follow to implement this Policy. UAMS Medical Center employees should refer to the UAMS Medical Center Policy [*Request for Alternative Method of Communications of Protected Health Information, PS.2.10.*](#)

EXAMPLES

Examples of requests include, but are not limited to the following:

1. Patient may request to receive mail from UAMS containing the patient's PHI at a work address instead of home.
2. Legal guardian of an elderly patient may request communications from UAMS to be sent to the legal guardian instead of the elderly patient. Legal guardian must provide court order appointing him/her as the legal guardian if one is not already in the patient's record for review and verification.
3. Patient may request telephone communications be limited to home telephone.

Signature: _____



Date: February 1, 2010

