Applicability: UW Medicine

Policy Title: Faxing Protected Health Information

Policy Number: PP-28

Superseded Policy(ies) or Entity Policy: N/A

Date Established: September 28, 2007

Date Effective: August 29, 2014


Next Review Date: August 29, 2017

PURPOSE AND SCOPE
This policy is applicable to all UW Medicine entities.

POLICY PRINCIPLES/STATEMENT
Patient information should only be faxed to fulfill a treatment, payment or healthcare operations obligation (see UW Medicine Compliance Policy: PP-07 Use and Disclosure of Protected Health Information to Carry Out Treatment, Payment, and Healthcare Operations), or a specifically authorized request (see UW Medicine Compliance Policy: PP-08 Use & Disclosure of Protected Health Information Requiring Authorization).

Fax machines should be safeguarded to reduce the likelihood of inappropriate access to patient information.

DEFINITIONS
See UW Medicine Compliance Policy: PP-00 Glossary of Terms.

POLICY
UW Medicine workforce members are required to fax in the manner described below to reduce the possibility of erroneous transmission and must include a fax cover sheet to minimize risk. The fax cover sheet must include the following elements:

1. Date of fax transmission;
2. Name of requestor and facility/organization;
3. Sender’s name;
4. Sender’s fax number;
5. Sender’s phone number;
6. Number of pages sent (including cover sheet);
7. Confidentiality Notice which includes a statement regarding re-disclosure;
8. Statement regarding communications for misdirected faxes and destruction.

To protect patient privacy, fax machines should not be placed in public access areas. See UW Medicine Information Security Policy: SEC-04 – Physical and Environmental Information Security Policy.

I. Sending Faxes

A fax coversheet is required; see Attachment A: Faxing Protected Health Information - Facsimile Cover Sheet.

Departments are responsible for a process to manage fax telephone numbers including maintenance of preprogrammed fax numbers, updating outdated fax numbers and confirming the accuracy of fax numbers on a recurring basis.

Workforce members should pre-program frequently used fax numbers to ensure accurate transmission. After selecting the recipient’s fax number from a pre-programmed list or keying the recipient’s fax number, check that the fax number is correct before sending the fax.

Fax logging functionality should be turned on. This log should be reviewed to identify and resolve any unsuccessful faxing attempts.

II. Receiving Faxes

Workforce members must promptly remove faxed documents from fax machines when fax machines are not located in a secure area.

If a fax is received in error, inform the sender if possible and dispose of the fax in a secure manner. See UW Medicine Information Security Policy SEC-05.02 – Media Handling Standard for Restricted and Confidential Information.

III. Misdirected Faxes

If a workforce member sends a fax to an incorrect number, the workforce member must immediately take steps to retrieve and/or destroy the information.

A. The workforce member must promptly call the recipient of the misdirected fax to have the receiver either destroy the information or mail the information back to the workforce member. See UW Medicine Information Security Policy: SEC-05.02 – Media Handling Standard for Restricted and Confidential Information.

B. The workforce member must notify UW Medicine Compliance to assist in the notification and documentation of the disclosure to the patient.

Main Line: 206.543.3098 (local) or 1.855.211.6193 (toll free)
Anonymous Compliance Hotline: 206.616.5248 (local) or 1.866.964.7744 (toll free)
Email: comply@uw.edu Fax: 206.221.5172
A copy of what patient information was faxed to an incorrect number must be provided to UW Medicine Compliance.

REGULATORY/LEGISLATION/REFERENCES
- RCW 70.02.150 - Security safeguards

PROCEDURE ADDENDUM(s) REFERENCES/LINKS
- PP-00 Glossary of Terms
- PP-07 Use and Disclosure of Protected Health Information to Carry Out Treatment, Payment, and Healthcare Operations
- PP-08 Use and Disclosure of Protected Health Information Requiring Authorization
- UW Medicine Information Security Policy SEC-05.02 – Media Handling Standard for Restricted and Confidential Information

Forms/Instructions (if applicable)

ROLES AND RESPONSIBILITIES
None.

AUTHORITIES

<table>
<thead>
<tr>
<th>Custodian</th>
<th>Responsible Officer</th>
<th>Implementation Officer</th>
<th>Administrative Officer</th>
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<tbody>
<tr>
<td>UW Medicine Compliance</td>
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<tr>
<td>Author</td>
<td>Owner</td>
<td>Auditor</td>
<td>Endorser</td>
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<tr>
<td>UW Medicine Compliance</td>
<td>UW Medicine Compliance</td>
<td>UW Medicine Compliance</td>
<td>UW Medicine Executive Compliance Committee</td>
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APPROVALS

UW Privacy Official
Johnese M. Spisso, Chief Health System Officer, UW Medicine & Vice President for Medical Affairs, UW