HIPAA Hints

Proper Disposal of Printed Protected Health Information Involves Shredding and the Use of Feeder Bins

HIPAA Safeguarding Policy 2.1.23 includes the proper procedures for disposal of printed protected health information (PHI). The following information describes the appropriate procedures for shredding paper PHI and using feeder bins.

- Where should I dispose of PHI in printed format? When discarding any papers containing PHI, use a shredder or place the records in a bin specifically designated as a shredding bin where the records and items will be retrieved for shredding. All shredding bins must be locked unless official HIPAA Office approval has been obtained to keep the bin unlocked. Do not leave documents containing PHI out on desks or countertops after business hours. Place them in locked storage bins, locked desk
- What is a feeder bin? A feeder bin is a container used for the temporary placement of PHI and UAMS confidential

drawers, or other secure areas.

information prior to placement in a locked shred bin. Containers must be located in a secure area not accessible or easily seen by patients and visitors.

- How do I know the container in my area is a feeder bin?
 - The containers must be clearly labeled in two places with the advertisement "Contains Confidential Information — Not for Regular Trash or Recycling."
- How often should I empty the feeder bin into a locked shred bin? The feeder bin should be emptied at least once daily. Do not leave PHI or UAMS confidential information in a feeder bin overnight.
- I put an irreplaceable document in the locked shred bin by mistake or our shred bin needs to be emptied and the vendor is not responding. Who can help? Contact UAMS Sustainability Services at 501-526-**0000** or on the intranet at http://www.uams.edu/ campusop/depts/sust/contacts.aspx
- I am the procurement specialist in my department. We want to use a personal-sized shredder machine. What type of machine should I order? If a personal shredder machine is used instead of a shred bin serviced by a UAMS vendor, it must be a cross-cut shredder with security level PL3 or higher.

Preventing inappropriate disclosure of PHI in paper format is crucial, but remember, each member of the UAMS workforce is responsible for the protection of PHI in *any* format. Evaluate your personal workflow for disposing of PHI to make sure it is in compliance with UAMS policy. If you do not know the answer, speak with your supervisor or contact the HIPAA office at 501-603-1369 or email HIPAA@uams.edu.

All UAMS HIPAA policies are available at: hipaa.uams.edu.



