

NUMBER: 2.1.04**DATE: 10/31/2002****REVISION: 9/17/07, 2/1/10, 11/15/10, 6/20/12; 3/5/14; 5/7/14; 05/16/18; 10/14/20; 9/13/22; 4/07/25 PAGE: 1 of 4****SECTION: ADMINISTRATION****AREA: GENERAL ADMINISTRATION****SUBJECT: FAXING OF PROTECTED HEALTH INFORMATION OR OTHER
CONFIDENTIAL INFORMATION****PURPOSE**

To establish the proper procedures for faxing Protected Health Information or other confidential information at the University of Arkansas for Medical Sciences (“UAMS”).

SCOPE

The UAMS Workforce.

DEFINITIONS

Confidential Information includes information concerning UAMS research projects, confidential employee information, information concerning the UAMS research programs, proprietary information of UAMS, and sign-on and password codes for access to UAMS computer systems. Confidential information shall include Protected Health Information.

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, health information about UAMS employees maintained by UAMS in its role as an employer and health information regarding a person who has been deceased for more than 50 years.

UAMS Workforce means physicians, employees, volunteers, resident/fellows, students 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.

Go to the UAMS HIPAA Office website at hipaa.uams.edu to access any other terms or definitions referenced in this policy.

POLICY

UAMS will undertake all reasonable efforts to protect the confidentiality of information faxed to

or from UAMS, including internal and external auto-faxed information. Such information includes, but is not limited to, PHI about patients, research data derived from human subjects, financial and business records, employee and student records, and any other privileged information.

PROCEDURE

1. Place fax machines that transmit or receive PHI and other Confidential Information in non-public, secure areas that can be monitored and controlled. Each UAMS department should monitor placement of its fax machine(s).
2. Confidential Information should only be faxed when mailing or other delivery methods will not suffice.
3. Carefully check the fax number to make sure you have the correct number for the intended recipient.
4. When manually entering the number, check to see that it has been entered correctly before sending.
5. Confirm fax number with the intended recipient when faxing to the party for the first time or if the fax number is not regularly used.
6. Program regularly used numbers into fax machines.
7. Check to make sure you are selecting the preprogrammed number for the correct party before sending.
8. Update fax numbers promptly in all relevant UAMS records upon receipt of notification of correction or change.
9. Delete outdated or unused numbers which are preprogrammed into the fax machines.
10. Avoid leaving patient information on fax machines after sending.
11. Both internal and external faxes containing PHI and other Confidential Information must be sent with a cover sheet containing the approved UAMS logo, and as stated below:

UAMS CONFIDENTIALITY NOTICE: The information contained in this facsimile document may be privileged, confidential, and protected under applicable law and is intended solely for the use of the individual or entity to whom it is addressed. If you are not the intended recipient or the employee or agent responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution, or copying of this communication is strictly prohibited. If you have received this communication in error, please notify the sender immediately. If you cannot reach the sender, please contact the UAMS HIPAA Office at 501-603-1379.

Alternate language may be used with approval from the HIPAA Office.

12. Some disclosures of Protected Health Information require a patient's signed authorization. If required, obtain the patient's signed authorization before faxing any Protected Health Information. Refer to UAMS Administrative Guide Policy 2.1.13, *Use and Disclosure of Protected Health Information and Medical Records Policy* and the associated authorization forms.
13. Confirm delivery of fax via telephone or by review of appropriate fax transmittal log sheet.
14. If a fax transmission containing PHI is inadvertently sent to someone other than the intended recipient:
 - A. Notify the UAMS HIPAA Office immediately by calling (501) 603-1379, emailing HIPAA@uams.edu and/or completing an incident report form on the UAMS HIPAA Office website.
 - B. Incidents of misdirected faxes will be promptly investigated to identify the cause and take steps to prevent future incidents. The document faxed to the wrong fax number is needed to investigate the incident. Contact the receiving party and ask them to **secure** the document until further notice. Do not ask that they discard or destroy the document.
15. Faxed material containing Confidential Information, whether transmitted or received, must be stored or disposed of appropriately (i.e., a fax cover sheet containing PHI must be shredded).
16. Fax machines that are no longer in use must be properly disposed of in accordance with UAMS Administrative Guide Policy 11.6.01, *Disposal of Surplus State Owned Property*.

SANCTIONS

Violation of this Policy will result in disciplinary action, in accordance with UAMS Administrative Guide Policy 4.4.02, *Employee Discipline* and UAMS Administrative Guide Policy 2.1.42, *HIPAA Sanctions Policy*.

Signature: _____



Date: April 7, 2025

(Place MR Label Here)

MR#:

Patient's Name:

Patient's Date of Birth:



To:		From:	
Company:		Company:	
Fax No:		Fax No:	
Phone No:		Phone No:	
Re:		Date:	
Total pages including cover sheet:		Time:	

Comments:

If you do not receive all pages, please contact us immediately at the telephone number listed above.

<p>UAMS CONFIDENTIALITY NOTICE</p> <p>The information contained in this facsimile document may be privileged, confidential, and protected under applicable law and is intended solely for the use of the individual or entity to whom it is addressed. If you are not the intended recipient or the employee or agent responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution, or copying of this communication is strictly prohibited. If you have received this communication in error, please notify the sender immediately. If you cannot reach the sender, please contact the UAMS HIPAA Office at 501-603-1379.</p>
