

UNIVERSITY OF FLORIDA
INFORMATION PRIVACY POLICIES & PROCEDURES
HEALTH INFORMATION OPERATIONAL GUIDELINES

Security: Verbal and Telephone Communications

A. POLICY

Rev: 06/01/2009

1. **Communications:** The University of Florida will use verbal and other person-to-person means (sign-language, notes, etc.) to communicate protected health information (PHI) as necessary for treatment, payment, and health care operations, in accordance with applicable federal and state regulations and laws.
2. **Use of Interpreters:**
 - a) *The University may engage an organization or individual as a business associate to perform interpreter services on its behalf, including private commercial companies, community-based organizations, or telephone interpreter service lines. A valid Business Associate Agreement is required.*
 - b) *In addition, the University may, without the patient's written authorization, use or disclose PHI to the patient's family member, close friend, or any other person identified or approved by the patient as his or her interpreter for a particular healthcare encounter. That interpreter is not considered a business associate of the health care provider.*
 - c) *In all cases, the health care provider may obtain the patient's agreement or reasonably infer, based on professional judgment that the patient does not object to the disclosure of PHI to the interpreter.*
3. **Use of Telecommunication Devices for the Hearing Impaired**
 - a) *Telecommunications Relay Services (TRS): The TRS is a public service, available without cost to all persons and businesses, none of whom need to employ, contract with or otherwise establish business relationships with the TRS. When performing services for a covered entity, the TRS is not acting for or on behalf of the covered entity and is not the covered entity's business associate.*
 - b) *As permitted by 45 C.F.R. §164.510(b), PHI can be shared during a telephone communication using the TRS because the individual will have an opportunity to agree or object to disclosures to the Call Assistant (CA).*

B. DEFINITIONS

Verbal Communications: Includes all types of oral and assisted communications where the intent is to carry on a dialogue between one or more persons.

C. PRIVACY REQUIREMENTS

1. **PHI must be safeguarded** against unauthorized use or disclosure.
2. **Use and disclosure of PHI must be limited** to the minimum necessary to accomplish the task for which it is used or disclosed.
3. **Patients have the right** to object to certain uses and disclosures of PHI.

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D. PROCEDURES

1. Verbal and Substitute Communications

- a) *Speak quietly when discussing a patient's protected health information.*
- b) *Do not discuss, verbally or by sign-language, protected health information in public areas; move to private areas for exchange of private information.*
- c) *Avoid the use of patient's names or other identifiers in conversations whenever possible.*

2. Telephone Use

- a) *Conduct telephone conversations, which include protected health information, where they cannot be overheard, if possible.*
- b) *Verify the identity of the other person(s) before proceeding with the conversation (see Verification of Identify and Authority in this manual).*
- c) *Never leave PHI (diagnoses, lab results, surgical procedures, etc.) on an answering machine, voicemail system, or with an unknown person who takes a message for a patient.*

(1) Leave enough information to be useful to the patient:

- (a) *Your name and the name of the care giver;*
- (b) *The name, "University of Florida Physicians", or the name of the clinic area, though preferably not the specific name of the clinic;*
- (c) *What the call is about: appointment time and date, change in appointment, insurance question, etc.;*
- (d) *Call-back number.*

(2) If the patient has authorized disclosures of PHI to another person, verify the identity of that person before sharing information.

3. Use of Interpreters: The patient's authorization is not required for use of an interpreter if the patient speaks a language other than English or is hearing impaired; and

- a) *The provider uses the interpreter to communicate about treatment, payment or health care operations; and*
- b) *The interpreter is a member of the University's workforce (i.e., a bilingual employee, a contract interpreter on staff, or a volunteer), and has completed HIPAA training and signed a Confidentiality Statement, or*
- c) *The interpreter meets the conditions outlined in the policies above.*

E. REFERENCES

HIPAA: 45 CFR §164.510(b) (Uses and Disclosures for Involvement in an Individual's Care), §164.522 (Right to Request Privacy Protections)

F. EXHIBITS: None