



**MONTANA STATE HOSPITAL  
POLICY AND PROCEDURE**

**PROTECTED HEALTH INFORMATION  
FACSIMILE TRANSMISSION**

**Effective Date:** February 15, 2019

**Policy:** HI-08

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- I. PURPOSE:** To insure patient confidentiality is protected when transmitting protected health information (PHI) to internal and external locations.
- II. POLICY:** PHI will be transmitted via facsimile transmission (fax) when this procedure is in the best interests of fostering immediate patient care.
- III. DEFINITIONS:**
- A. Protected Health Information (PHI):** Individually Identifiable Health Information (IIHI) transmitted electronically in any medium or maintained in any medium.
- B. Individually Identifiable Health Information (IIHI):** Subset of Health Information (HI) including demographic information, collected from an individual that is created or received by a health care provider, health plan, employer, or health care clearinghouse that:
1. Relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual;
  2. Relates to the past, present, or future payment for the provision of health care to an individual;
  3. Identifies the individual; or
  4. There is a reasonable basis to believe the information can be used to identify the individual.
- IV. RESPONSIBILITIES:**
- A. Health Information:** Verify appropriate authorization to release, log all released information and receipt of requested information, route documents to necessary staff.
- B. Clinical Staff:** Document information transmitted and notify Health Information Release of Information Clerk of information sent. (V. A. 5.)

V. PROCEDURE:

A. Transmitting documents from the medical record:

1. Except as allowed by law, a properly completed and signed authorization to release information will be obtained prior to the disclosure by fax. An authorization to release information transmitted via fax machines is acceptable.
2. A Montana State Hospital (MSH) facsimile transmission coversheet will be the first page of every document transmittal. It will contain the following statement:

“This transmittal consists of information which may be confidential according to state and federal law. These documents are intended for the viewing and use of the person requesting the information and named on this facsimile transmittal sheet. If the reader of this message is not the person named on this facsimile transmittal sheet, please be notified that any use, dissemination, distribution, or copying of this information is strictly prohibited by state and federal law, and may result in a penalty. If you have received this communication in error, please phone the person named on this transmittal sheet as the sending party or contact Health Information at 406-693-7173 to report the transmission error. Thank you for your cooperation.”

3. When medical record information is faxed the following will be documented on the MSH Fax Coversheet:
  - a. The information faxed (specify which documents).
  - b. Destination of faxed information (name of individual, facility, city/state, and fax number).
  - c. Date fax sent.
  - d. Health Information staff will document this information in the TIER EHR Discharge Data log.
4. When faxing PHI to a telephone number that is not regularly used, first confirm the fax number with the intended recipient.
5. Clinical staff are encouraged to have all patient information sent by the Health Information Service.
6. Clinical staff faxing patient records will document the information sent to other providers in the progress notes and notify Health Information Staff via a copy of the Fax Coversheet.

B. Documents prohibited from transmission via FAX.

1. Any patient care document reflecting AIDS/HIV related conditions.
2. Sexually transmitted disease results.

C. Sending Request for information to other providers:

1. Place a copy of the request along with the fax cover sheet in the medical record. Send the original request to the other provider if requested.
2. Document in TIER EHR Discharge Data log.
  - a. Destination of faxed request for information.
  - b. Date of fax.
  - c. MSH staff requesting information.

D. Receiving faxed documents:

1. Only approved facility personnel are authorized to monitor the fax machine and receive information.
  - a. Health Information staff, admitting staff, ward clerks, nursing and clinical staff, switchboard operators and administrative assistants.
2. Documents will be removed immediately from the machine, pages counted and any instructions verifying receipt of documents followed.
3. Faxed documents will be distributed according to their instructions.

E. Misdirected Fax:

1. If a fax transmission fails to reach the recipient, the internal logging system of the fax machine will be checked to obtain the recipient's fax number.
2. If fax is to an incorrect fax number, fax to the incorrect fax number an explanation about the misdirected information, and request destruction of all documents received.
3. Notify the Director of Health Information of all incidents of misdirected fax.

F. Location of equipment shall be in areas with limited access where the security of the data is ensured.

**VI. REFERENCES:** None

**VII. COLLABORATED WITH:** Social Work Supervisor, Director of Clinical Services, Director of Nursing, Rehabilitation Department Manager.

**VIII. RESCISSIONS:** HI-08, *Protected Health Information Facsimile Transmission* dated May 4, 2015; HI-08, *Medical Records Facsimile Transmission* dated November 2, 2009; HI-08, *Medical Records Facsimile Transmission* dated October 30, 2006; HI-08, *Medical Records Facsimile Transmission* dated September 1, 2002; HI-08, *Medical Records*

*Facsimile Transmission* dated February 14, 2000; HOPP HI-07-97-N, *Medical Records – Facsimile Transmission*, dated February 24, 1997.

- IX. DISTRIBUTION:** All hospital policy manuals.
- X. ANNUAL REVIEW AND AUTHORIZATION:** This policy is subject to annual review and authorization for use by either the Administrator or the Medical Director with written documentation of the review per ARM § 37-106-330.
- XI. FOLLOW-UP RESPONSIBILITY:** Director of Health Information.
- XII. ATTACHMENTS:** For internal use only.
- A. Facsimile Transmission Cover Sheet

Signatures:

Kyle Fouts  
Interim Hospital Administrator

Melinda Bridgewater  
Director of Health Information