


<p><b>DEPARTMENT:</b> Compliance</p> <p><b>POLICY TITLE:</b> CMP28 Paper Document Controls</p>		
<p><b>REVIEWED BY:</b> Compliance Officer</p>	<p><b>REVIEW DATE:</b> 11/08/2019</p>	<p><b>EFFECTIVE DATE:</b> 12/01/2019</p>
<p><b>APPROVED BY:</b> Compliance Committee</p>	<p><b>APPROVAL DATE:</b> 11/11/2019</p>	

**PURPOSE:**

To ensure that Arizona Priority Care (AZPC) uses proper controls when handling all documents containing Protected Health Information (PHI) in paper format.

**POLICY:**

It is AZPC's policy that all forms of paper PHI are protected in accordance with federal and state laws and regulations, including HIPAA. This includes the confidentiality of patient's medical, financial, personal and other information regulated by these guidelines. See also AZPC policy: Disposal of Protected Health Information and Faxing of Patient Identifiable Medical Information.

**PROCEDURE:**

1. To ensure compliance, every employee has a responsibility to handle such protected paper PHI by the following:
  - a. All forms of paper PHI shall not be left unattended unless specifically locked up in a secured location.
  - b. All forms of paper PHI shall not be left unattended at any time in vehicles and not checked in as baggage on commercial airlines.
  - c. Visitors must be escorted to areas where PHI is contained and PHI must not be visible, unless they are authorized to review PHI.
  - d. Disposal of PHI is only conducted in compliance with HIPAA regulations and AZPC policy: Disposal of Protected Health Information. This includes utilizing an external destruction vendor and obtaining evidence that all PHI has been destroyed according to Federal, State and HIPAA laws.
  - e. PHI must not be removed from any of the AZPC premises except for routine business purposes.
  - f. Faxed information containing PHI must not be left unattended and all fax machines must be placed in a secure area.
  - g. Faxes must contain a confidentiality statement notifying persons receiving the information in error to immediately destroy such information.

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- h. PHI being mailed is to be done via secured methods and disks and other transportable media must be encrypted.
- i. Returned/undeliverable mail containing PHI is forwarded back to sender to confirm/update the recipient's address and, as appropriate, to notify the recipient of returned mail.
- j. Shredder bins must be made readily available for proper storage and destruction of PHI documents.
- k. Shredder bins must be clearly marked and not filled to overflowing.

**DEFINITIONS:**

None

**REFERENCES:**

Heritage Provider Network Policies  
45 CFR § 164.530(c)

**APPENDICES:**

None

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**DOCUMENT REVISION LOG**

<b>Date</b>	<b>Document Modification (including deletions)</b>	<b>Page(s)</b>	<b>Location</b>
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