

---

**University of Wisconsin-Madison  
Policy and Procedure**

Policy Number: 7.3  
Policy Title: Requests by Patients for Alternative Confidential Communications  
Effective Date: April 14, 2003  
Last Revision Date: August 1, 2014  
Page 1 of 4

---

**I. Policy**

The HIPAA Privacy Rule requires that patients be allowed to request communication from a healthcare provider by an alternative means or at an alternative location (e.g., other than their home address or telephone number). UW-Madison complies with the Privacy Rule with respect to patients request for alternatives to communication. This document describes how UW-Madison ensures that patients' requests regarding how their protected health information is communicated to them are handled appropriately.

**II. Definitions**

- A. **Alternative Communication:** A communication from provider to patient by an alternative means or at an alternative location. Examples may include using an alternate mailing address or phone number; or using an alternate communication vehicle (phone, mail or email) rather than the provider's standard method of communication.
- B. **Protected Health Information ("PHI"):** Health information or health care payment information, including demographic information collected from an individual, which identifies the individual or can be used to identify the individual. PHI does not include student records held by educational institutions or employment records held by employers.
- C. **UW-Madison Health Care Component ("UW HCC"):** Those units of the UW-Madison that have been designated by the University as part of its health care component under HIPAA. For a complete list of the campus units that comprise the Health Care Component, refer to UW-Madison Privacy Policy # 1.1 "Designation of the UW-Madison Health Care Component".

**III. Procedures**

- A. Patients may request that they receive communications of PHI by alternative means or at alternative locations at the time of visit, or at any time during the course of their care.

---

**University of Wisconsin-Madison  
Policy and Procedure**

Policy Number: 7.3  
Policy Title: Requests by Patients for Alternative Confidential Communications  
Effective Date: April 14, 2003  
Last Revision Date: August 1, 2014  
Page 2 of 4

---

- B. Patient requests to receive communications of PHI by alternative means or at alternative locations must be made in writing using the Alternative Confidential Communication Request Form (located within the “Forms” tab at [hipaa.wisc.edu](http://hipaa.wisc.edu)).
- C. Each UW HCC unit must designate a HIPAA Privacy Coordinator (the Privacy Officer functions as the Privacy Coordinator for those units comprised of individuals performing internal business support functions on behalf of the units that provide health care). He or she will make decisions about reasonableness of the request.
- D. All patient requests should be forwarded to the HIPAA Privacy Coordinator at the UW HCC unit for a decision.
- E. The UW HCC unit may deny a request for alternative confidential communications only if:
  - 1. The request is unreasonable from an administrative standpoint and/or;
  - 2. The patient does not provide an alternative address or other method of contact.
- F. Reasonableness of a request from an administrative standpoint may vary by the size and complexity of the UW HCC unit.
- G. The UW HCC unit will not require that the patient provide a reason for their request.
- H. The UW HCC unit will not deny requests based on its perception of whether the patient has a good reason for making the request. A patient’s reason for making a request cannot be used to determine whether the request is reasonable.

---

**University of Wisconsin-Madison  
Policy and Procedure**

Policy Number: 7.3  
Policy Title: Requests by Patients for Alternative Confidential Communications  
Effective Date: April 14, 2003  
Last Revision Date: August 1, 2014  
Page 3 of 4

---

- I. If a UW HCC unit grants a patient's request, it will inform appropriate staff of the alternative communication requirements and will require staff to adhere to them.
- J. An alternative communication request that is implemented remains in place until it is revoked by the patient or until such time as the UW HCC unit determines that it no longer meets the administrative reasonableness criteria. Revocation or denial of an implemented request will be communicated to provider and patient and documented in the patient record.
- K. Each patient will be informed in writing whether his/her request has been approved or denied and, if approved, that all future communications initiated by the UW HCC unit will be made in this manner. (Exception: if it is necessary to communicate urgently with the patient, staff may use any available address or phone number.)
- L. Each UW HCC unit must develop processes to implement the approved change requests within each unit.

**IV. Documentation Requirements**

- A. If the UW HCC unit grants a patient's request, the decision will be documented by maintaining a written or electronic record of the action taken. (See Sample Letter Accepting Individual's Request for Alternative Confidential Communications located within the "Forms" tab at [hipaa.wisc.edu](http://hipaa.wisc.edu)).
- B. Patient written request for alternative communication, and the organization's response will be maintained in the medical record.

**V. Forms**

- Alternative Confidential Communication Request Form

---

**University of Wisconsin-Madison  
Policy and Procedure**

Policy Number: 7.3  
Policy Title: Requests by Patients for Alternative Confidential Communications  
Effective Date: April 14, 2003  
Last Revision Date: August 1, 2014  
Page 4 of 4

---

- Sample Letter Accepting Individual's Request for Alternative Confidential Communications
- Sample Letter Denying Individual's Request for Alternative Confidential Communications

**VI. References**

- 45 CFR 164.522(b) (HIPAA Privacy Rule)
- 45 CFR 164.510 (HIPAA Privacy Rule)
- 45 CFR 164.502(h) (HIPAA Privacy Rule)

**VII. Related Policies**

None.

**VIII. For Further Information**

For further information concerning this policy, please contact the UW-Madison HIPAA Privacy Officer or the appropriate unit HIPAA Privacy Coordinator or sub-Coordinator. Contact information is available within the "Contact Us" tab at [hipaa.wisc.edu](http://hipaa.wisc.edu).

**Reviewed By**

Chancellor  
Chancellor's Task Force on HIPAA Privacy  
UW-Madison HIPAA Privacy Officer  
UW-Madison Office of Legal Affairs

**Approved By**

Interim HIPAA Privacy and Security Operations Committee