



University of Connecticut Health Center

POLICY NUMBER 2003-06

March 20, 2009

**POLICY: HIPAA FUNDRAISING COMPLIANCE POLICY
(Privacy & Security of Protected Health Information (PHI))**

PURPOSE: To comply with applicable HIPAA requirements when implementing and conducting fundraising activities, such as prospect identification, solicitations for gifts, and maintaining donor records of grateful patients, which may use or disclose PHI.

DEFINITION: Fundraising is defined as the organized activity of raising funds for an organizational cause.

SCOPE: All workforce members of UCHC, The Development Office of UCHC and the University of Connecticut Foundation, Inc.

POLICY STATEMENT:

1. The UCHC states the following in its Notice of Privacy Practices: “We may contact you in an effort to raise money for the Health Center and its operations. We may disclose information to The University of Connecticut Foundation, Inc. so that they may contact you to raise money for the Health Center. The information released would only include your name, address, telephone number, gender, insurance status and dates of service at the Health Center. If you do not want the Health Center to release this information about you for fundraising efforts, you must notify The University of Connecticut Foundation, Inc. at 1-800-269-9965 or www.foundation.uconn.edu.”
2. All patients will receive the above referenced Notice of Privacy Practices upon their first date of service at UCHC on /after April 14, 2003.
3. The University of Connecticut Foundation, Inc. has jurisdiction over all UCHC department's fundraising efforts in order to assure compliance with HIPAA regulations. No UCHC employee may undertake fundraising efforts without contacting the UCHC Development Office of the UConn Foundation.

The HIPAA Privacy Law allows disclosure of only the following information to an institutionally related foundation:

- a) patient demographic information and
- b) dates of health care services provided.

4. As required by HIPAA, all fundraising information sent to a patient by the Foundation includes directions for the patient about how to “opt out” of receiving any future fundraising communications.
5. Fundraising activities that disclose a patient's PHI to the Foundation, other than patient demographic information and dates of health care services provided, for example specific diagnosis, require an authorization signed by the patient prior to the fundraising activity. Approved authorization forms can only be obtained from the University of Connecticut Foundation, Inc.
6. In order to assure full compliance with opt out patient choice and required authorization, all UCHC fundraising efforts, for example, fundraising lists set up for phone or mail solicitations, or invitation lists for fundraising events done by any UCHC staff or department, must be coordinated exclusively through The University of Connecticut Foundation, Inc. Patient opt out as well as fundraising efforts completed using PHI as authorized by the patient, are tracked by the Foundation. This assures that no patients are sent fundraising communications if they have opted out, and authorizations are completed as needed.
7. The UCHC may continue to send newsletters, brochures and other educational and event information to those patients who have “opted out”.
8. The UCHC’s institutionally-related foundation obtains non-PHI information for Fundraising from UCHC’s IDX database on a quarterly basis.
9. If a UCHC employee believes a patient may be a potential grateful patient, the employee may provide an individual patient name, patient demographic information and dates of service directly to the UCHC Development Office of the UConn Foundation. No other PHI may be shared with the Foundation.

Reference: §164.514 (f) Health Insurance Portability and Accountability Act of 1996

Iris Mauriello
Corporate Compliance Integrity/Privacy Officer

6/30/09
Date

John K. Martin
President, University of Connecticut Foundation

6/23/09
Date

Cato T. Laurencin, M.D., Ph.D.
Vice President for Health Affairs

7/1/09
Date

Revised: 03/20/09

Replaces: Policy dated 11/04/03