

General Policy When Using Email Between Patients and Providers

D.J. VERRET, MD, PA recognizes that the use of electronic mail between clinicians and patients is a convenient and popular communication tool. D.J. VERRET, MD, PA does not want to undermine the effectiveness of email, but D.J. VERRET, MD, PA must ensure that certain parameters exist which protect the confidentiality of patients and insure the appropriate use of email. The following criteria must be adhered to when using email:

- All emails used to communicate between providers and patients must be in accordance with all HIPAA policies and procedures already established.
- Emails containing PHI must be treated with the same degree of privacy and confidentiality as the patient's medical record.
- D.J. VERRET, MD, PA will make all email messages sent or received, concerning the treatment of a patient, part of the patient's medical record.
- When using email, D.J. VERRET, MD, PA personnel should limit the information transmitted to the minimum necessary to meet the requester's needs and use de-identified PHI whenever applicable

However, these two requirements do not apply if the patient has signed the Agreement for Patient e-Communication.

Message Processing

Each member of the staff of D.J. Verret, MD, PA is responsible for processing their own e-mail. All messages sent to general e-mail boxes will be processed by the president of D.J. Verret, MD, PA or his/her designee.

Hours of Operation and Availability

All e-mails will be processed during regular business hours and within two business days of receipt as possible.

E-mail Archiving

All e-mail will be kept in the patient's medical record or in e-mail archives for the same period required for all medical records.

Record Management of Email Correspondence between Personnel and Patients

Emails between the provider and patient are to be stored in the medical record and these emails should be deleted from the provider's email account as required by and in accordance with the record retentions schedule.

Topics of Email Communication

Email communication should be used to address administrative issues, relay follow-up information, and answer questions following a face to face evaluation and consultation. Initial evaluation and diagnosis and topics of a sensitive nature should not be communicated through email. The health care provider should use “due care” in corresponding with the patient through email.

The following topics are considered appropriate for e-mail communication:

- Prescription refills
- General medical advice after an initial face to face visit
- Lab test results
- Appointment requests for non-urgent problems
- Simple treatment instructions
- Patient education to improve health literacy

Examples of inappropriate topics may include:

- Discussion of HIV status
- Worker’s compensation claims
- Urgent matters are not appropriate for e-mail communication

Composition of E-mails to Patients

Emails should be considered the same as a formal letter to the patient.

Email communication lends itself to a sense of informal conversation; thus providers need to be aware of the tendency for informality which may be inappropriate.

All emails between office staff, providers, and patients must include in the header or footer or at the end of the email, “To our patients, please note email is not necessarily confidential and should be used for routine matters only. Urgent or emergent issues should be handled by telephone. Emails may not be read in a timely manner if I am out of the office. If you have not received a response within two (2) business days, please contact our office at 972.608.0100”