SUBJECT: Printer, Photocopier, and Facsimile (FAX) Transmission for Documents Containing Personally Identifiable Information (PII) and/or Protected Health Information (PHI)

References: See Enclosure 1.

1. PURPOSE. This Defense Health Agency-Administrative Instruction (DHA-AI), based on the authority of References (a) and (b), and in accordance with the guidance of References (c) through (g):

   a. Establishes the Defense Health Agency’s (DHA) procedures for printing, photocopying, and transmitting and/or receiving via FAX, documents that contain PII and/or PHI (hereinafter PII/PHI).

   b. Incorporates, updates, and cancels References (h) and (i).

2. APPLICABILITY. This DHA-AI applies to all DHA personnel to include: assigned, attached, or detailed Service members, federal civilians, contractors (when required by the terms of the applicable contract), and other personnel assigned temporary or permanent duties at DHA, to include intermediate management organizations, markets, and medical treatment facilities.

3. POLICY IMPLEMENTATION. It is DHA’s policy, pursuant to References (d) through (g), that:

   a. All documents containing PII/PHI that are printed, photocopied, or transmitted and/or received by FAX must be protected against unauthorized disclosure, access, or misuse.

   b. All DHA personnel are required to adhere to appropriate administrative, physical, and technical safeguards established herein to protect PII/PHI from unauthorized disclosure, access, or misuse.
4. RESPONSIBILITIES

   a. **Director, DHA.** The Director, DHA, will:

      (1) Maintain oversight activities and management controls to ensure compliance with this DHA-AI.

      (2) Delegate authority to the DHA Privacy and Civil Liberties Office (PCLO) to develop and update supporting templates, training, and guidance under this DHA-AI, as necessary.

   b. **Chief, PCLO.** The Chief, PCLO, will:

      (1) Develop and maintain templates, training, and guidance available under this DHA-AI, as necessary.

      (2) Periodically, and as needed, inspect documents developed by DHA Deputy Assistant Directors (DADs) that demonstrate compliance with this DHA-AI, including copies of written procedures and/or forms utilized in support of a DHA DADs written procedure(s).

5. PROCEDURES. See Enclosure 2.

6. releasability. **Not cleared for public release.** This DHA-AI is available to users with Common Access Card authorization on the DHA SharePoint site at: https://info.health.mil/cos/admin/pubs/SitePages/Home.aspx.

7. EFFECTIVE DATE. This DHA-AI:

   a. Is effective upon signature.

   b. Will expire 10 years from the date of signature if it has not been reissued or cancelled before this date in accordance with DHA-Procedural Instruction 5025.01 (Reference (c)).
Enclosures
   1. References
   2. Procedures
Glossary
ENCLOSURE 1

REFERENCES

(a) DoD Directive 5136.01, “Assistant Secretary of Defense for Health Affairs (ASD(HA)),” September 30, 2013, as amended
(c) DHA-Procedural Instruction 5025.01, “Publication System,” August 21, 2015, as amended
(e) DoD 6025.18-R, “DoD Health Information Privacy Regulation,” January 24, 2003
(f) DoD Instruction 8580.02, “Security of Individually Identifiable Health Information in DoD Health Care Programs,” August 12, 2015
(h) TRICARE Management Activity Administrative Instruction 048, “TRICARE Management Activity Facsimile Transmission Policy for Documents Containing Personally Identifiable Information and/or Protected Health Information,” May 31, 2012 (hereby cancelled)
(i) TRICARE Management Activity Administrative Instruction 049, “TRICARE Management Activity Printer and Photocopier Policy for Documents Containing Personally Identifiable Information and/or Protected Health Information,” June 27, 2012 (hereby cancelled)
ENCLOSURE 2

PROCEDURES

1. DHA DADs. DHA DADs will establish, in writing, procedures to comply with the requirements of this DHA-AI, including roles and responsibilities related to implementation.

   a. They must physically locate and configure devices that print, copy, transmit, and/or receive documents containing PII/PHI to minimize the risk of unauthorized access. When possible, they should consider designating devices to be used exclusively to print, copy, transmit, and/or receive documents containing PII/PHI. Devices must be labeled in accordance with DoD Information Security Program requirements.

      (1) If using a device in a common work area that does not require a Common Access Card to initiate and complete a print or copy job, the device will be configured to print a cover sheet for each job.

      (2) DHA DADs must configure FAX machines to automatically print out a verification report, whenever possible, to validate that the FAX was sent to the correct number and that all pages were transmitted.

   b. Upon completion of a print, copy, or FAX job, all documents containing PII/PHI will be removed from the device immediately.

2. DHA Personnel. DHA personnel are prohibited from allowing unauthorized personnel access to, or use of, DHA devices that are used for the copying, printing, transmission, and/or receipt of PII/PHI.

   a. They must confirm a recipient’s FAX number, whether pre-programmed or not, prior to sending a document containing PII/PHI to avoid an unauthorized disclosure.

      (1) Prior to sending a FAX, DHA personnel must contact the recipient, whenever possible, to ensure that the receiving FAX machine is in a secure area and that PII/PHI will not be left unattended.

      (2) Pre-programmed numbers must be checked on a quarterly basis, verified, and/or updated for accuracy. Any DHA personnel who is notified of a change in a recipient’s FAX number must promptly check to see if the FAX number is pre-programmed and update as necessary.
(3) Any documents sent from DHA by FAX must be accompanied by a cover page that includes, but is not limited to, the name and contact information of the sender and recipient and the number of pages being transmitted. A confidentiality statement must be included on all FAX cover pages whenever any PII/PHI is being transmitted. The following is an example:

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THIS FAX IS INTENDED ONLY FOR THE USE OF THE PERSON AND/OR OFFICE TO WHOM IT IS ADDRESSED AND MAY CONTAIN PII/PHI. ALL RECIPIENTS ARE HEREBY NOTIFIED THAT INADVERTENT OR UNAUTHORIZED RECEIPT OF PII/PHI CONSTITUTES A BREACH. IF YOU HAVE RECEIVED THIS FAX IN ERROR, PLEASE DESTROY THE ATTACHED DOCUMENT(S), AND NOTIFY THE SENDER IMMEDIATELY.
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b. When using a device that has page caches and electronically stores pages to be printed, copied, transmitted, and/or received in case of a device fault, the initiating DHA personnel must, in the case of such a fault, confirm the completion of the print, copy, or FAX job after a fault is corrected or cleared.

c. In the event of an erroneous FAX transmission, which included PII/PHI, the DHA personnel who sent the FAX in error must:

   (1) Contact the recipient, if possible, and request that the FAX be destroyed; and

GLOSSARY

PART I. ABBREVIATIONS AND ACRONYMS

DAD  Deputy Assistant Director
DHA  Defense Health Agency
DHA-AI  Defense Health Agency-Administrative Instruction

FAX  facsimile

PCLO  Privacy and Civil Liberties Office

PHI  Protected Health Information

PII  Personally Identifiable Information

PART II. DEFINITIONS

These terms and their definitions are for the purposes of this DHA-AI.

PHI. Individually identifiable health information created, received, or maintained by a covered entity, including DHA, that is transmitted or maintained by electronic or any other form or medium, except as otherwise contained in employment records held by DHA in its role as an employer.

PII. Information which can be used to distinguish or trace an individual’s identity, such as name, Social Security number, date and place of birth, mother’s maiden name, biometric records, home phone numbers, and any other demographic, personnel, medical, and financial information. PII includes any information that is linked to a specified individual, alone, or when combined with other personal or identifying information.