

Confidential Healthcare Communications:

A key policy tool in protecting the safety and privacy of victims and survivors

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In Delaware, despite existing privacy safeguards, family members who serve as the insurance policyholder have access to insured dependents' (spouses, partners, young adult and teenaged children) Personal Health Information (PHI), creating gaps in privacy that can result in safety and health issues. When individuals can depend on confidentiality, they are more likely to seek the care they need.

Confidential Communications Request

Victims know best how they can safely communicate and are more likely to access care if they know confidentiality is being ensured.

- Any communication regarding sensitive services should be directed only to the person who received the care.
- Delaware should adopt a standardized Confidential Communications Request Form for healthcare providers and insurers to use with patients.
- Allow for requests verbally or in writing

EOB Suppression

EOBs, Explanations of Benefits, can create a safety and privacy issue when sent to the policyholder, rather than to the individual who received the care.

- EOBs should not be issued when a specific request related to safety is made.
- Suppress EOBs for sensitive services.
- Suppressing EOBs when no balance for payment remains.
- EOBs should be sent only to the patient who received care and should be sent by method of their choice.
- Codes for sensitive services on EOBs should be modified to non-specific explanations.

States with Existing Policies

Confidential Communications Request:
CA, CO, IL, MD, MA, OR, WA

EOB Suppression:
CA, MA, NY, WI
CT, DE, FL (no EOB for STI treatment)
HI (no EOB for minors who can consent to MH care)

Inclusive Definitions

"Sensitive services" : services related to reproductive health, sexually transmitted infections, substance use disorder, gender dysphoria, gender-affirming care, domestic and sexual violence, and mental health.

"Protected individual" : any insured member who is legally authorized to consent to that member's own care.

For additional information, including further best practice solutions, please contact DCADV's Domestic Violence & Community Health Program Manager at eridout@dcadv.org

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