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**PURPOSE**

The marketing policy is to provide instruction on how and when marketing activities can occur with and without a signed HIPAA compliant authorization.

**POLICY**

All communications that market a product or service that encourages recipients of the communication to purchase or use the product or service requires a valid signed authorization by the recipient of the communication.

The authorization must inform the recipient if direct or indirect remuneration has been exchanged for the use and disclosure of the Protected Health Information (PHI) to make the marketing communication.

**Not Marketing - No Authorization Required**

- To describe a health-related product or service (or payment for such product or service) that is provided by, or included in a plan of benefits of, the covered entity making the communication, including communications about:
  - The entities participation in a health care provider network or health plan network.
  - Replacement of , or enhancements to , a health plan; and health -related products or services available only to a health plan enrollee that add value to but are not part of , a plan of benefits.
- To treat the individual.
- For case management or care coordination for the individual, or to direct or recommend alternative treatments, therapies, health care providers, or settings of care to the individual.

**REFERENCES**

45 CFR 164.501, §164.508(a), §164.508(b), §164.514(f)

**CONTACT**

For additional information concerning this policy, contact the MDHHS Bureau of Legal Affairs.