

Guidelines for the removal and transport of PHI

See IU HIPAA Policy HIPAA-P08 Removal and/or Transport of Protected Health Information

The following safeguards shall be implemented to protect against the loss, theft, unauthorized access, use, disclosure, alteration or destruction of protected health information.

- Department Lead shall approve and accept any risks associated with the removal and transport of PHI for telecommuting purposes.
- Supervisor or Principal Investigator shall approve an individual's request and specific documents to be removed.
- The individual requesting to remove documents containing PHI shall confirm their home environment can be appropriately managed to ensure the privacy and security of the documents.
- HIPAA Privacy and Security Training must be up-to-date prior to an individual removing PHI.
- The documents (charts, binders, etc.) assigned to each individual being removed, must be logged out and logged back in upon return.
- The number of documents logged out by an individual shall be limited and only the minimum necessary needed to perform the job duties.
- The data elements contained on the documents shall be noted.
- Two individuals should be present while logging out and logging in documents to ensure the correct documents have been taken/returned. The log shall be signed by the individual and the witness.
- During transport, charts should be in a locked container or a sealed envelope/box and not carried loosely offsite and viewable or accessible to others.
- Documents are never to be left in an unattended vehicle.
- Documents are never to be brought into a public location (Starbucks, etc.).
- Documents are to remain in the possession of the staff member at all times during transport and should be transported directly from the school office to the home office, i.e. not left in the car to run an errand or overnight.
- Secure documents at home when not in use by returning to the locked container or envelope/box.
- The integrity of the documents are to be maintained while off site.
- Any incident involving the privacy or security of documents containing any restricted or critical data is to be reported immediately to it-incident@iu.edu.
- Departments that transport documents containing PHI during their regular course of business may comply with the HIPAA P-08 policy by continuing to follow the department's established protocols.

Contact: HIPAA Privacy Officer, 812-856-0340, hipaa@iu.edu