

Best Practices: Transporting PII or PHI

Introduction

This paper provides guidance and best practices for transporting personally identifiable information (PII) and protected health information (PHI). A sample chain-of-custody template is also included. Covered entity (CE) and business associate (BA) workforce members are responsible for protecting all PII/PHI and complying with federal laws such as the Privacy Act of 1974 and the HIPAA Privacy and Security Rules. Administrative, technical and physical safeguards should be applied to ensure the confidentiality, integrity, and availability of PII/PHI

Definitions

<u>Business Associate (BA)</u>: A person or entity that performs certain functions or activities that involve the use or disclosure of protected health information on behalf of, or provides services to, a covered entity.

<u>Covered Entity (CE)</u>: Ahealth plan or a health care provider who transmits any health information in electronic form in connection with a standard transaction.

<u>Protected Health Information (PHI)</u>: Individually identifiable health information that is transmitted or maintained by electronic or any other form or medium. PHI excludes individually identifiable health information in employment records held by a covered entity in its role as employer.

Discussion

When permitted under applicable regulations, PII/PHI may be physically transported between approved locations. A chain-of-custody log should be used to document any transfer of paper files or electronic media. Logs should include control numbers (or other tracking data), the times and dates of transfers, names and signatures of individuals releasing the information, and a general description of the information being released.

Before transporting outside of a CE/BA, PII/PHI should be placed in non-transparent envelopes or wrappings. Envelopes should be clearly marked with the names and addresses of the originating and destination locations and the inner documents should be labeled "For Official Use Only." In addition, tracking methods should be used that allow senders and recipients to sign for and verify delivery.

During authorized travel, paper files and electronic portable media must be properly labeled (paper files in labeled envelopes) and stored in locked carry-on luggage. PII/PHI cannot be a part of checked baggage when traveling.







Electronic portable media should be encrypted whenever possible and/or password protected. Passwords or encryption keys should be disclosed through a different medium such as a separate e-mail or phone call; they should never accompany the actual media.

Transported PII/PHI should be delivered only to individuals who are authorized to receive such information. PHI/PII received by unauthorized individuals may result in a breach. Information regarding breach response and reporting within the Military Health System can be found on the DHA Privacy Office Web site at: http://www.tricare.mil/tma/privacy/breach.aspx

Resources/References

DoD 5200.1-PH, "DoD Guide to Marking Classified Documents," April 1997
DoD 5400.11-R, "Department of Defense Privacy Program," May 14, 2007
DoD 6025.18-R, "DoD Health Information Privacy Regulation," January 24, 2003
DoD 8580.02-R, "DoD Health Information Security Regulation," July 12, 2007
DoD Memorandum, "Encryption of Sensitive Unclassified Data at Rest on Mobile Computing Devises and Removable Storage Media", July 3, 2007

Appendix A: Sample Chain-of-Custody Template

The attached chain-of-custody template may be used as a reference and can be customized. When using the template in conjunction with PHI, the final documentation must be retained for a period of six years in accordance with the HIPAA Privacy and Security Rules.







Chain-of-Custody Documentation

<Date>

T .		-		
Descrip	tion	of	items:	<>

Original Recipient	Custody Transfer 1
Name:	Name:
Signature:	Signature:
Organization/Directorate:	Organization/Directorate:
Address:	Address:
Address:	Address:
City, State, ZIP Code:	City, State, ZIP Code:
Phone Number:	Phone Number:
Date and Time of Receipt:	Date and Time of Receipt:
Custody Transfer 2	Custody Transfer 3
Name:	Name:
Signature:	Signature:
Organization/Directorate:	Organization/Directorate:
Address:	Address:
Address:	Address:
City, State, ZIP Code:	City, State, ZIP Code:
Phone Number:	Phone Number:
Date and Time of Receipt:	Date and Time of Receipt:



