



TMA PRIVACY BOARD

PRINCIPAL INVESTIGATOR CERTIFICATION

(Required from a Principal Investigator Obtaining Written Authorization from Research Participants for the Use or Disclosure of Protected Health Information (PHI))

Title of Research Project:
Principal Investigator (PI):
Number of the Related Data Sharing Agreement Application (DSAA):
Government Sponsor:

The HIPAA Privacy Rule, as implemented by Department of Defense (DoD) Health Information Privacy Regulation (DoD 6025.18-R), requires that any signed Authorization be documented and retained. In order to document compliance with the requirements for approval of a DSAA authorizing the use or disclosure of PHI in a research project based on a signed Research Authorization, the PI must certify to the TMA Privacy Office that he/she has met the below requirements.

As PI of the research project indicated on this form, I, _____, hereby certify that:
(initial each statement and sign below)

_____ I will obtain a signed and dated Authorization, as approved by the TMA Privacy Board, from each research participant *before* accessing, obtaining and/or using PHI from TMA pertinent to any individual research participant in the above-referenced research project.

_____ I will provide every individual research participant with a copy of their signed and dated Authorization.

_____ I will maintain, electronically or in hard copy, a signed and dated Authorization from each research participant whose PHI is used or disclosed in the research project for a period of 6 years from the date the Authorization expires.

_____ I will provide any and/or all signed Authorizations to the TMA Privacy Office immediately upon request.

_____ I will immediately notify the TMA Privacy Office when a research participant revokes his/her signed Authorization, and I will no longer seek to obtain PHI pertaining to that individual from TMA for the research project indicated on this form or for any other purpose, absent a separate Authorization or appropriate waiver.

_____ I understand that this Principal Investigator Certification is binding upon and will inure to the benefit and obligation of the Principal Investigator of the research project indicated on this form and his/her respective successors and/or assigns.

Principal Investigator Certification, Last updated 8/01/12

TMA Privacy and Civil Liberties Office * 7700 Arlington Blvd., Suite 5101, Falls Church, VA 22042-5101

<http://www.tricare.mil/tma/privacy/>



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In accordance with DoD 8520.02, only Principal Investigators with a CAC card may provide an electronic signature as permitted on this template. For Principal Investigators who do not have a CAC card, please print the completed application, provide a handwritten signature, and scan the document so that it may be attached to an email for submission.

PI Signature

Date

PI Printed Name

For Viewing
Purposes Only

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