

Safeguarding of Protected Health Information (PHI)

I Purpose

Harvard Pilgrim Health Care (Harvard Pilgrim) values individuals' privacy rights and is committed to safeguarding protected health information (PHI) and personal information (PI). To support this commitment, Harvard Pilgrim has established a number of privacy and security policies related to the use and disclosure of PHI/PI.

II Policy

- Harvard Pilgrim has implemented policies and procedures related to the safeguarding, use, and disclosure of individuals' information in accordance with federal and state laws and regulations.
- PHI/PI may be used and/or disclosed only as necessary for treatment, payment, or health care operations; pursuant to an authorization by the member or their Personal Representative; pursuant to an Institutional Review Board (IRB) waiver for purposes of research; or as otherwise permitted or required by law. Permitted uses/disclosures are outlined in Harvard Pilgrim's Notice of Privacy Practices.
- Harvard Pilgrim has designated a Privacy Officer who has oversight responsibility for the development and implementation of privacy policies and procedures in order to comply with HIPAA and other federal and state data privacy laws.
- Harvard Pilgrim has designated a Chief Information Security Officer who has responsibility to oversee development and enforcement of security policies and procedures in order to comply with HIPAA and other federal and state data security laws.
- All workforce members are required to complete privacy and security training upon hire and annually thereafter.
- Harvard Pilgrim's Notice of Privacy Practices informs members of the permitted uses and disclosures of PHI/PI and individuals' rights under HIPAA.
- Harvard Pilgrim maintains policies and procedures related to the reporting, investigation, and mitigation of potential security incidents and privacy exposures.

PUBLICATION HISTORY

07/01/20	reviewed; edited to bring document up-to-date
01/01/23	reviewed; no edits