

COMPANION GUIDE: PROTECTED HEALTH SECURITY REQUIREMENT

The requirement for triple-lock security of protected health information (PHI) can be challenging for many providers to meet—yet it is critical to safeguard beneficiary PHI. Under MIHP guidelines in effect as of January 1, 2019, providers are required to maintain beneficiary records in a triple-lock system, **to the extent possible**, recognizing that in some circumstances it may be impractical or unreasonably difficult to do so.

A triple-lock security system for a typical office setting requires a workable, locking filing cabinet inside an office or room with a locking door, within a building with locking exterior doors and windows. Filing cabinets and doors may have either key locks or numeric combination locks, but in either case only authorized staff may have access to the keys or the combinations. A home-based provider must meet the same requirements, and must ensure that a locking filing cabinet is located in a separate room with a key or numeric combination lock, and that the home's exterior doors and windows can be securely locked.

Beneficiary records and charts may be kept in a vehicle during business travel, provided staff remain in the vehicle. If the staff person exits the vehicle, all records must be removed from the vehicle and the staff person must maintain physical possession of the records at all times while outside the vehicle, *unless the records are secured in a locking container within the locked vehicle.*

When traveling with beneficiary records, providers are required to return them to their agency's main office by close of business on the day of travel. Exceptions to this may be made for unique circumstances, however records may never be left in a vehicle unattended, unless secured in a locking container within the locked vehicle as noted above. When not practical or possible to return beneficiary records to the agency office (e.g., agency closes prior to completion of beneficiary visit, or the return trip to the agency is an unreasonable distance), records may be maintained securely in a locking container in a hotel room or a personal residence with locked exterior doors and windows until they can be safely returned to the agency.

The above requirements also apply to electronic storage of beneficiary records and electronic medical records (EMR) on desktops, laptops, cell phones, and tablets. Computers and electronic devices are considered the electronic equivalent of filing cabinets, and the secure password(s) used to access them are the electronic equivalent of key or numeric combination locks on filing cabinets. As with filing cabinets, all computers, laptops, cell phones, and tablets should be secured in locking offices or rooms, in buildings (or personal residences) with locking exterior doors and windows. Portable electronic devices that are removed from buildings must be in the physical possession of MIHP provider staff at all times.

MIHP providers are expected to use their best professional judgement and employ commonly accepted security practices in the event that the triple-lock security system cannot be maintained, **however this should be the exception to the rule.** Providers who are able to document the steps they take to maintain security of beneficiary records when a triple-lock system cannot be maintained will not be penalized during the certification review process.