Specific to the COVID-19 crises, in certain circumstances, Penn State (or the “University”) business needs may require remote work that involves access to or processing of Protected Health Information (PHI). Remote work introduces unique risks to confidentiality, integrity, and availability of PHI. Further, federal law (HIPAA) requires certain practices, procedures, and controls to be put in place when interacting with PHI from any location, to ensure patient confidentiality.

If your unit or department has been identified and designated as a HIPAA “covered component” and it’s necessary to move your operations to working remotely you must follow the remote working (or telehealth) procedures established by the Office of Information Security, including all security requirements included in the Work from Home Guidelines for Secure Enclaves (COVID-19) document. These procedures have been developed and will be implemented in order to protect the University and its patients, to maintain compliance with HIPAA and in accordance with University policies AD22, AD53, and AD95, and to avoid or mitigate the risks arising from remote access to PHI. This procedure document excludes Penn State Health.

It is the responsibility of every employee accessing PHI remotely to follow the requirements laid out in the established procedures. Any violation of these agreed upon requirements will be subject to the University HIPAA Sanctions Procedure.

If you have further questions please contact the Office of Information Security at security@psu.edu.