

# CMS Policy

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## *Institutional Policy*

|                          |                                |
|--------------------------|--------------------------------|
| Title:                   | CMS Policy                     |
| Responsible Officer:     | Director, Research Informatics |
| Original Effective Date: | 3/6/2014                       |
| Revised Date:            | 2/8/2019                       |
| Renewal Date:            | On or before 2024              |
| Approved By:             | <i>Kathryn Tasker</i>          |

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## **1 Purpose**

The purpose is to provide an inclusive list of underlying policies applicable to CMS engagements.

## 2 Scope

This policy applies to all principal investigators and all named persons on an data sharing or data use agreements with CMS (Center for Medicare Services) to use sensitive existing data or working under the direction of an HSL employee named on an Agreement to use sensitive existing data.

## 3 Definitions

*Term:* Sensitive Data

Any data which contains Social Security Numbers or other personal identification numbers, confidential personal or financial information, protected health information, student educational records, proprietary customer data or information that is otherwise deemed to be protected by HSL corporate policy, state, federal, or international laws, statutes, or regulations or explicitly identified in a contract.

## 4 Policy Statement

The following institutional policies and procedures apply to those projects, principal investigators and their respective team members working with CMS data.

## 5 Procedures

Unless explicitly excluded or overridden by contract or data use agreement, the following policies apply to all CMS projects.

### 5.1 Applicable Policies

| Level | Category | Policy Name                               | Notes                   |  |
|-------|----------|---|-------------------------|--|
| HSL   | IT       | Use of Information Technology             |                         |  |
|       |          | Computer Use, Email and Communications    |                         |  |
|       |          | HIPAA                                     |                         |  |
| IFAR  | IRB      | Standard Operating Procedures             |                         |  |
|       |          | Limited Data Sets and Data Use Agreements |                         |  |
|       |          | Staff Change and Data Access              |                         |  |
|       |          | Data Management                           | Sensitive Data Security |  |
|       |          | Sensitive Data Sharing                    |                         |  |
|       |          | Sensitive Data Suppression                |                         |  |
|       |          | Sensitive Data Retention and Destruction  |                         |  |
|       | IT       | Data Encryption                           |                         |  |

## 6 Related Policies

The document author(s) have attempted to identify policies that may be applicable or related to this policy. This is not an exhaustive list. All HSL employees are expected to abide by all active policies of the organization at all times. As such, employees are encouraged to review any and all potentially applicable policies regardless of whether they are identified below. HSL reserves the right to modify, cancel, or enact new policies at anytime, without notice.

- NA (no known related policies)

## 7 Reference Materials

NA

## 8 Appendix

NA

## 9 Document Properties

|            |                 |
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