**INSTRUCTIONS:** This form must be completed for each new software program, application service provider, app or website, or new equipment/hardware proposed for use during the project. Submit this completed Appendix D to the appropriate Grants Manager with the SPA for review and routing for signature prior to submission for funding and/or the start of the study if unfunded.

1. **STUDY INFORMATION**
2. Title of Project:
3. HPHC/I Principal Investigator/Degree(s):

**B. CHECKLIST**

|  |  |
| --- | --- |
| Question | Response |
| Technology Approach: | Make  Purchase & Implement  External Service Provider |
| Purpose: | |
| Will the application use, store, allow access or transmit information classified as PHI or PI or business proprietary to HPHC (BPI)? | PHI Yes  No  PI Yes  No  BPI Yes  No |
| Will the application collect, store, modify, allow access or report any of the following:  1. Social Security Number  2. Tax ID #  3. HPHC ID #  4. Demographic information (including name, address, phone, email address, dob)  5. Race, ethnicity, language information  6. Credit card information  7. Healthcare information (claims, diagnosis, other clinical data)  8. HPHC employee information | 1. Yes  No  2. Yes  No  3. Yes  No  4. Yes  No  5. Yes  No  6. Yes  No  7. Yes  No  8. Yes  No |
| Who are the users of the technology? | HPHC Internal  Employer Groups & their Reps  Providers & their Representatives  Members  Others: |
| Will third parties be used to store, access or transmit information?  If yes, will these third parties use off shore resources? | Yes  No  Unknown  Yes  No  Unknown |
| Will data be supplied in the form of an extract? | Yes  No |
| Will the project include use of a website?  If yes, will there be Harvard Pilgrim branding? | Yes  No  Yes  No |
| What types of communications are expected? | Internal Reporting  External Reporting  Mail/Email /Telephone to members  None |
| Has a previous privacy and/or security evaluation of the technology/entity been completed? | Yes  No |
| Do we have executed privacy and security agreements on file? | Yes  No |
| Who from Legal is reviewing the contract? | Name:  Not yet assigned  N/A |

1. **CERTIFICATIONS**

The Chief Information Security Officer is required to sign the Routing and Certification Form, Section K.