

PRIVACY AND PROTECTION OF OUR PATIENTS' AND EMPLOYEES' PERSONAL INFORMATION

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I. OBJECTIVE:

Our objective, in the development and implementation of this comprehensive written information security plan ("Plan") is to create effective administrative, technical and physical safeguards for the protection of personal information of residents of the Commonwealth of Massachusetts, and to comply with our obligations under 201 CMR 17.00. The Plan sets forth our procedure for evaluating our electronic and physical methods of accessing, collecting, storing, using, transmitting, and protecting personal information of residents of the Commonwealth of Massachusetts. For purposes of this Plan, "personal information" means a Massachusetts resident's first name and last name or first initial and last name *in combination* with any one or more of the following data elements that relate to such resident: (a) Social Security number; (b) driver's license number or state-issued identification card number; or (c) financial account number, or credit card or debit card number, with or without any required security code, access code, personal identification number or password, that would permit access to a resident's financial account; provided, however, that "personal information" shall not include information that is lawfully obtained from publicly available information, or from federal, state, or local government records lawfully made available to the general public.

II. PURPOSES:

The purpose of the Plan is to:

- a. Ensure the security and confidentiality of personal information;
- b. Protect against any anticipated threats or hazards to the security or integrity of such information; and
- c. Protect against unauthorized access to or use of information in a manner that creates a substantial risk of identity theft or fraud.

III. SCOPE:

In formulating and implementing the Plan, we will (1) identify reasonably foreseeable internal and external risks to the security, confidentiality, and/or integrity of any electronic, paper or other records containing personal information; (2) assess the likelihood and potential damage of these threats, taking into consideration the sensitivity of the personal information; (3) evaluate the sufficiency of existing policies, procedures, customer information systems, and other safeguards in place to control risks; (4) design and implement a plan that puts safeguards in place to minimize those risks, consistent with the requirements of 201 CMR 17.00; and (5) regularly monitor the effectiveness of those safeguards.

IV. DATA SECURITY COORDINATOR:

We have designated our office manager to implement, supervise, and maintain the Plan. The office manager (the "Data Security Coordinator") will be responsible for:

- a. Initial implementation of the Plan;
- b. Training employees;
- c. Regular testing of the Plan's safeguards;
- d. Evaluating the ability of each of our third party service providers to protect, in the manner required by 201 CMR 17.00, the personal information to which we have permitted them access; and taking the steps reasonably necessary to ensure that such third party service provider is applying to such personal information protective security measures at least as stringent as those required to be applied to such information under 201 CMR 17.00;
- e. Reviewing the scope of the security measures in the Plan at least annually, or whenever there is a material change in our business practices that may implicate the security or integrity of records containing personal information;
- f. Conducting an annual training session for all owners, managers, employees and independent contractors, including temporary and contract employees who have access to personal information on the elements of the Plan. All attendees at such training sessions are required to certify their attendance at the training, and their familiarity with the firm's requirements for ensuring the protection of personal information.

V. INTERNAL RISKS:

To combat internal risks to the security, confidentiality, and/or integrity of any electronic paper or other records containing personal information, and evaluating and improving, where necessary, the effectiveness of the current safeguards for limiting such risks, the following measures are mandatory and are effective immediately. To the extent that any of these measures require a phase-in period, such phase-in must be completed on or before January 1, 2010:

Internal Threats:

- A copy of the Plan must be distributed to each employee who shall, upon receipt of the Plan, acknowledge in writing that he/she has received a copy of the Plan.
- There must be immediate retraining of employees on the detailed provisions of the Plan.
- Employment contracts must be amended immediately to require all employees to comply with the provisions of the Plan, and to prohibit any nonconforming use of personal information during or after employment; with mandatory disciplinary action to be taken for violation of security provisions of the Plan. *(The nature of the disciplinary measures may depend on a number of factors including the nature of the violation and the nature of the personal information affected by the violation.)*
- The amount of personal information collected must be limited to that amount reasonably necessary to accomplish our legitimate business purposes, or necessary to us to comply with other state or federal regulation.
- Access to records containing personal information shall be limited to those persons who are reasonably required to know such information in order to accomplish our legitimate business purpose or to enable us to comply with other state or federal regulations.
- Electronic access to user identification after multiple unsuccessful attempts to gain access must be blocked.
- All security measures shall be reviewed at least annually, or whenever there is a material change in our business practices that may reasonably implicate the security or integrity of records containing personal information. The Data Security Coordinator shall be responsible for this review and shall fully apprise management of the results of that review and any recommendations for improved security arising out of that review.
- Terminated employees must return all records containing personal information, in any form, that may at the time of such termination be in the former employee's possession (including all such information stored on laptops or other portable devices or media, and in files, records, work papers, etc).
- A terminated employee's physical and electronic access to personal information must be immediately blocked. Such terminated employee shall be required to surrender all keys, IDs or access codes or badges, business cards, and the like, that permit access to the firm's premises or information. Moreover, such terminated employee's remote electronic access to personal information must be disabled; his/her voicemail access, e-mail access, internet access and passwords must be invalidated. The Data Security Coordinator shall maintain a highly secured master list of all lock combinations, passwords and keys.
- Current employees' user-IDs and passwords must be changed periodically.
- Access to personal information shall be restricted to active users and active user accounts only.
- Employees are encouraged to report any suspicious or unauthorized use of customer information.
- Whenever there is an incident that requires notification under M.G.L. c. 93H, §3, there shall be an immediate mandatory post-incident review of events and actions taken, if any, with a view to determining whether any changes in our security practices are required to improve the security of personal information for which we are responsible.
- Employees are prohibited from keeping open files containing personal information on their desks when they are not at their desks.
- At the end of the work day, all files and other records containing personal information must be secured in a manner that is consistent with the Plan's rules for protecting the security of personal information.
- Each department shall develop rules (bearing in mind the business needs of that department) that ensure that reasonable restrictions upon physical access to records containing personal information are in place, including a written procedure that sets forth the manner in which physical access to such records in that department is to be restricted; and each department must store such records and data in locked facilities, secure storage areas or locked containers.
- Access to electronically stored personal information shall be electronically limited to those employees having a unique log-in ID; and re-log-in shall be required when a computer has been inactive for more than a few minutes.
- Visitors' access must be restricted to one entry point for each building in which personal information is stored, and visitors shall be required to present a photo ID, sign-in and wear a plainly visible "GUEST" badge or tag. Visitors shall not be permitted to visit unescorted any area within our premises that contains personal information.
- Paper or electronic records (including records stored on hard drives or other electronic media) containing personal information shall be disposed of only in a manner that complies with M.G.L. c. 931.

VI. EXTERNAL RISKS:

To combat external risks to the security, confidentiality, and/or integrity of any electronic paper or other records containing personal information, and evaluating and improving, where necessary, the effectiveness of the current safeguards for limiting such risks, the following measures are mandatory and are effective immediately. To the extent that any of these measures require a phase-in period, such phase-in must be completed on or before January 1, 2010:

External Threats:

- There must be reasonably up-to-date firewall protection and operating system security patches, reasonably designed to maintain the integrity of the personal information, installed on all systems processing personal information.
- There must be reasonably up-to-date versions of system security agent software which must include malware protection and reasonably up-to-date patches and virus definitions, installed on all systems processing personal information.
- To the extent technically feasible, all personal information stored on laptops or other portable devices must be encrypted, as must all records and files transmitted across public networks or wirelessly, to the extent technically feasible. Encryption here means the transformation of data through the use of an algorithmic process, or an alternative method at least as secure, into a form in which meaning cannot be assigned without the use of a confidential process or key, unless further defined by regulation by the Office of Consumer Affairs and Business Regulation.
- All computer systems must be monitored for unauthorized use of or access to personal information.
- There must be secure user authentication protocols in place, including: (1) protocols for control of user IDs and other identifiers; (2) a reasonably secure method of assigning and selecting passwords; (3) control of data security passwords to ensure that such passwords are kept in a location and/or format that does not compromise the security of the data they protect; (4) restriction of access to active users and active user accounts only; and (5) blocking of access to user identification after multiple unsuccessful attempts to gain access.
- The secure access control measures in place must include assigning unique identifications plus passwords, which are not vendor-supplied default passwords, to each person with computer access to personal information.