

**STATEMENT OF RESPONSIBILITIES BETWEEN
The Maryland Advanced Research Computing Center (MARCC) and [PI name]**

MARCC has implemented data security measures to protect privacy of research data according to JHU's policies and standards, applicable legal requirements and expected applicable safeguards under the HIPAA Security Rule. The policies in place at the MARCC Secure Environment (MSE) strictly apply to all personnel who are involved in research endeavors dealing with Protected Health Information (PHI) data. These measures are in compliance with the final provisions of the security and privacy rules regulated by the Health Insurance Portability and Accountability Act (HIPAA).

MARCC also complies with JHU's minimum-security standards for systems with PHI, namely physical security, encryption of data at rest, and facility monitoring. This Statement of Responsibilities identifies the respective roles of MARCC and the Research Principal Investigator ("PI") to ensure that data handled by MARCC is maintained in a manner consistent with applicable laws and JHU policies. Failure of a PI to carry out their obligations as outlined in this statement and in applicable policies may result in that PI being denied further access to MARCC resources.

MARCC's Secure Environment (MSE) will provide resources to conduct research on data that contains PHI, also known as HIPAA data. It is critical that both parties understand and agree that handling sensitive data is a shared responsibility and that policies and procedures must be strictly followed to avoid potential damages and minimize risk. A set of Frequently Asked Questions addressing HIPAA requirements at MARCC is available at: <https://www.marcc.jhu.edu/getting-started/faqs/>.

MARCC's Responsibilities

1. Provide a secure HIPAA compliant system meeting the standards of the HIPAA Security Rule and containing appropriate safeguards to prevent the inappropriate use or disclosure of the information provided
2. Maintain proper documentation that describes how researchers can use, disclose, and dispose protected data <https://www.marcc.jhu.edu/marcc-policies/hipaa/>
3. Not use or disclose PHI data in violation of these policies or for purposes other than for the IRB protocol for which the data is being shared
4. Secure backups of the data (off-site)
5. Provide scientific support for data management, analysis, and application support
6. Use documented adequate data disposal practices
7. Follow guidelines and enforce policies
8. Implement secure network protocols
9. Ensure a monthly training session on HIPAA regulations at MARCC, both for staff and users
10. Monitor all processes at all times and provide LOG files of all events when required

