

Protected Health Information Safeguards Guide

Overview

Stannp implements comprehensive administrative, physical, and technical safeguards to protect Protected Health Information (PHI) in all forms. Our safeguards align with HIPAA Security Rule requirements and follow guidance from the National Institute of Standards and Technology (NIST).

Minimum Necessary Principle

We limit PHI access and disclosure to the minimum necessary to accomplish the intended purpose. We process only the PHI provided by covered entities for the specific purposes authorized in our Business Associate Agreement. Our workforce is trained to handle PHI according to minimum necessary principles, ensuring data is accessed and used only by personnel who require it to perform authorized services. This principle applies to all uses and disclosures except those made to individuals, pursuant to authorization, to healthcare providers for treatment, to HHS for enforcement, or as required by law.

Encryption and Data Protection

All PHI is protected with 256-bit AES encryption at rest and TLS 1.2/1.3 in transit, achieving an A+ SSL rating from Qualys. Data is hosted exclusively in secure US facilities on Microsoft Azure infrastructure.

Access Controls

Access to systems containing PHI requires strong authentication. Multi-factor authentication is mandatory for internal systems accessing PHI, with automatic timeout and account lockout protections. Systems employ automatic timeout after 30 minutes of inactivity, account lockout after three failed login attempts, and annual access reviews to remove unnecessary permissions. Workstations are positioned to prevent unauthorized viewing, and rooms with PHI access are locked when not in use.

Secure Disposal

When PHI is no longer needed, all materials are securely destroyed. Secure disposal procedures comply with regulatory requirements and ensure PHI cannot be read or reconstructed.

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