HIPAA POLICIES AND PROCEDURES

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| **Policy Title:**  Information Integrity Policy **ID:  InformationIntegrityPolicy07072015**  **rev: 0.8** | | **Approval Date:**  00/00/0000  **Effective Date:** 00/00/0000  **Revisited date:** 00/00/0000 |
| **Subject:** Policy for information Integrity | | |
| **Primary Responsible Departments and/or BAA:**  Security / Compliance / Google BAA | | **Review Frequency:**  **Last Review:** 00/00/0000  **Next Review:** 00/00/0000 |
| **Secondary Responsible Departments and/or BAA:**  Administration / IT | |

**Scope:**

Workforce, BAA’s

**Purpose:**  
To comply with all applicable laws, regulations and our own policies this policy covers information integrity and how to Implement policies and procedures to protect electronic protected health information (EPHI) from improper alteration or destruction thereby protecting the Information’s integrity.

**Authoritative Reference:**

45 CFR § 164.312(c)(1)

**Policy Definitions:**

**1. Improper Alteration -** Information must not be altered as a result of any reasonable foreseeable and administratively addressable risk to the integrity of the data. Data stored or transmitted outside the scope of our Google BAA must be documented in compliance with all current regulations and this policy framework for alteration compliance.

**2. Improper Destruction or Removal -** Information must never be destroyed or removed unless it’s in a manner in accordance with these policies. Data removed or destroyed must be documented in compliance with all current regulations and this policy framework for destruction and removal compliance. All reasonable foreseeable and administratively addressable risks to the integrity of the process for data destruction and removal must be address with specific procedure remedies.

**Violations:**

Workforce members found to have violated this policy, may be subject to disciplinary action up to and including termination of employment.

**Related Policies and Procedures:**

**Administrative:**

HIPAA Security Management Root Process

HIPAA Assigned Security Responsibility  
HIPAA Workforce Security

HIPAA Information Access Management

HIPAA Security Awareness and Training

HIPAA Security Incident Procedures

HIPAA Contingency Plan

HIPAA Evaluation

**Physical:**

HIPAA Device and Media Control Policy

HIPAA Facility Access Control Policy

**Technical:**

HIPAA Access Control Policy

HIPAA Audit Policy

HIPAA Authentication Policy

HIPAA Workstation Use Policy

HIPAA Workstation Security Policy

HIPAA Information Integrity Policy

HIPAA Transmission Security Policy

**BAA’s and Other Agreements:**

HIPAA Business Associate and Other Agreement Policy  
Google BAA