



## Oklahoma State University

<b>Title: Integrity Controls</b>	<b>Policy #: SEC-16.01</b>
<b>Category: HIPAA Compliance</b>	<b>Authority: 45 CFR § 164.312(e)(2)(i)</b> <b>HIPAA SECTION:</b>
<b>Standard: Transmission Security</b>	<b>Responsibility: Health Care Components</b>
<b>Effective Date: 4/20/2005</b>	<b>Pages: Page 1 of 1</b>
<b>Approved By: OSU Legal Counsel</b>	<b>Revised: 7/1/2013</b>

### **PURPOSE:**

To provide a mechanism to ensure data transmissions remain secure and intact

### **POLICY:**

OSU will implement security measures to ensure that electronically transmitted electronic protected health information is not improperly modified without detection until disposed of. §164.312(e)(2)(i)

Each CHS employee is to know how to safely and securely handle and access EPHI. Each software system must have a mechanism to verify data integrity of electronically transmitted EPHI.

### **PROCEDURE:**

OSU will utilize the security options of its various systems to lock down the user's ability to erroneously change or modify in any way. There are limitations to the software and as a result OSU cannot completely control changes or modifications. Outside of legitimate changes, the Audit logs will be used to track unwarranted changes to patient's records.

All logins to the network and various software systems which contain ePHI are tracked electronically. OSU does have the ability to track users access within the Electronic Medical Record and Practice Management systems to the extent that a user who searches for, views, adds, updates, or deletes certain information in relation to any patient can be produced in a report.

### **REFERENCE:**

Isolating Health Care Clearinghouse Functions  
Encryption and Decryption  
Mechanism to Authenticate PHI