

URI HIPAA PRIVACY POLICY # 43

Title:	DOCUMENTATION	Purpose & Background	See Memo Entitled "HIPAA at URI: Introduction to HIPAA and an Overview of HIPAA Implementation at URI" available online at the URI HIPAA website
Originator (Responsible Department/ Unit):	URI HIPAA Compliance Oversight Committee	Effective Date:	05/22/2018
Applies to:	All URI Departments and Units Designated as HIPAA "Covered Components" and "Business Associate Components"	Revised Date(s):	

POLICY:

I. Documentation Required

- A. All policies and procedures required by HIPAA and its implementing privacy and security regulations shall be maintained in written and/or electronic form.
- B. All communications required to be in writing shall be maintained in writing, or in an electronic copy, as documentation.
- C. If HIPAA requires that an action, activity or designation be documented, the University of Rhode Island shall maintain a written or electronic record of such action, activity or designation.

II. Retention Period

The University of Rhode Island shall maintain all of the documentation required under HIPAA and the URI HIPAA Policies for a period of at least six (6) years from the date it was created or the date when it last went into effect, whichever is later. In the event of a complaint, investigation, audit, legal action or other proceeding, relating to such documentation, the documentation shall be retained until the final resolution of the complaint, investigation, audit, legal action or other proceeding, or six years from the date it was created or the date when it last went into effect, whichever is later.