Data Classification and Handling Policy

Purpose
The purpose of this policy is to establish a framework for classifying and handling University data based on its level of sensitivity, value and criticality to the University as required by the University’s Information Security Plan. Classification of data will aid in determining baseline security controls for the protection of data.

Scope
This policy applies to all University employees who access, process, or store sensitive University data.

Definitions
Confidential Data- Generalized term that typically represents data classified as confidential, according to the data classification scheme defined in this document. This term is often used interchangeably with sensitive data.

Data Owner- An individual or group of people who have been officially designated as accountable for specific data that is transmitted, used, and stored on a system or systems within a department, college, school, or administrative unit of the University. See the Information Security Roles and Responsibilities document for more information.

Data Custodian- Employee of the University who has administrative and/or operational responsibility over information assets. See the Information Security Roles and Responsibilities document for more information.

Institutional Data- All data owned or licensed by the University

Information Assets- Definable pieces of information in any form, recorded or stored on any media that is recognized as “valuable” to the University

Non-public Information- Any information that is classified as Internal/Private Information according to the data classification scheme defined in this document.

Sensitive Data - Generalized term that typically represents data classified as Confidential according to the data classification scheme defined in this document.

Data Classification
Data classification, in the context of information security, is the classification of data based on its level of sensitivity and the impact to the University should that data be disclosed, altered or destroyed without authorization. The classification of data helps determine what baseline security controls are appropriate
for safeguarding that data. All institutional data should be classified into one of three sensitivity levels (tiers), or classifications:

**Tier 1 - Confidential Data**

Data should be classified as Confidential when the unauthorized disclosure, alteration or destruction of that data could cause a significant level of risk to the University or its affiliates. Examples of Confidential data include data protected by state or federal privacy regulations and data protected by confidentiality agreements. The highest level of security controls should be applied.

Access to Confidential data must be controlled from creation to destruction, and will be granted only to those persons affiliated with the University who require such access in order to perform their job (“need-to-know”). Access to Confidential data must be individually requested and then authorized by the Data Owner who is responsible for the data.

Tier 1 Confidential data is highly sensitive and may have personal privacy considerations, or may be restricted by federal or state law. In addition, the negative impact on the institution should this data be incorrect, improperly disclosed, or not available when needed is typically very high. Examples of Confidential/Restricted data include official student grades and financial aid data, social security and credit card numbers, and individuals’ health information.

**Tier 2 - Internal/Private Data**

Data should be classified as Internal/Private when the unauthorized disclosure, alteration or destruction of that data could result in a moderate level of risk to the University or its affiliates. By default, all information assets that are not explicitly classified as Confidential or Public data should be treated as Internal/Private data. A reasonable level of security controls should be applied to internal data.

Access to Internal/Private data must be requested from, and authorized by, the Data Owner who is responsible for the data. Access to Internal/Private data may be authorized to groups of persons by their job classification or responsibilities (“role-based” access), and may also be limited by one’s department.

Internal/Private Data is moderately sensitive in nature. Often, Tier 2 Internal/Private data is used for making decisions, and therefore it’s important this information remain timely and accurate. The risk for negative impact on the University should this information not be available when needed is typically moderate. Examples of Internal/Private data include official university records such as financial reports, human resources information, some research data, unofficial student records, and budget information.
**Tier 3-Public Data**
Data should be classified as Public when the unauthorized disclosure, alteration or destruction of that data would result in little or no risk to the University and its affiliates. While little or no controls are required to protect the confidentiality of Public data, some level of control is required to prevent unauthorized modification or destruction of Public data.

Public data is not considered sensitive; therefore, it may be granted to any requester or published with no restrictions. The integrity of Public data should be protected. The appropriate Data Owner must authorize replication or copying of the data in order to ensure it remains accurate over time. The impact on the institution should Level 3 Public data not be available is typically low, (inconvenient but not debilitating). Examples of Public data include directory information, course information and research publications.

**Data Collections**
Data Owners may wish to assign a single classification to a collection of data that is common in purpose or function. When classifying a collection of data, the most restrictive classification of any of the individual data elements should be used. For example, if a data collection consists of a student’s name, address and social security number, the data collection should be classified as Confidential even though the student’s name and address may be considered Public information.

**Determining Classification**
The goal of information security, as stated in the University’s Information Security Plan, is to protect the confidentiality, integrity and availability of information assets and systems. Data classification reflects the level of impact to the University if confidentiality, integrity or availability of the data is compromised.
<table>
<thead>
<tr>
<th>Security Objective</th>
<th>POTENTIAL IMPACT</th>
<th>MODERATE</th>
<th>HIGH</th>
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<tbody>
<tr>
<td><strong>Confidentiality</strong>- Preserving authorized restrictions on information access and disclosure, including means for protecting personal privacy and proprietary information.</td>
<td>The unauthorized disclosure of information could be expected to have a limited adverse effect on organizational operations, organizational assets, or individuals.</td>
<td>The unauthorized disclosure of information could be expected to have a serious adverse effect on organizational operations, organizational assets, or individuals.</td>
<td>The unauthorized disclosure of information could be expected to have a severe or catastrophic adverse effect on organizational operations, organizational assets, or individuals.</td>
</tr>
<tr>
<td><strong>Integrity</strong>- Guarding against improper information modification or destruction, and includes ensuring information non-repudiation and authenticity.</td>
<td>The unauthorized modification or destruction of information could be expected to have a limited adverse effect on organizational operations, organizational assets, or individuals.</td>
<td>The unauthorized modification or destruction of information could be expected to have a serious adverse effect on organizational operations, organizational assets, or individuals.</td>
<td>The unauthorized modification or destruction of information could be expected to have a severe or catastrophic adverse effect on organizational operations, organizational assets, or individuals.</td>
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<td><strong>Availability</strong>- Ensuring timely and reliable access to and use of information.</td>
<td>The disruption of access to or use of information or an information system could be expected to have a limited adverse effect on organizational operations, organizational assets, or individuals.</td>
<td>The disruption of access to or use of information or an information system could be expected to have a serious adverse effect on organizational operations, organizational assets, or individuals.</td>
<td>The disruption of access to or use of information or an information system could be expected to have a severe or catastrophic adverse effect on organizational operations, organizational assets, or individuals.</td>
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Predefined Types of Confidential/Restricted Information Assets

Based upon state, federal, and contractual requirements that Michigan Tech is bound by, the following information assets have been predefined as Level 1 or Level 2 data and must be protected:

**Personally Identifiable Education Records-Covered under FERPA**

Personally Identifiable Education Records are defined as any education records that contain one or more of the following personal identifiers:

- Student M Number
- Grades, GPA, Credits Enrolled
- Social Security Number
- Race/Gender
- A list of personal characteristics or any other information that would make the student’s identity easily traceable

**Personally Financial Identifiable Information (PIFI) - Covered under GLBA**

For the purpose of meeting security breach notification requirements, PII is defined as a person’s first name or first initial and last name in combination with one or more of the following data elements:

- Social security number
- State-issued driver’s license number
- Date of Birth
- Financial account number in combination with a security code, access code or password that would permit access to the account

**Payment Card Information- Covered under PCI DSS**

Payment card information is defined as a credit card number (also referred to as a primary account number or PAN) in combination with one or more of the following data elements:

- Cardholder name
- Service code
- Expiration date
- CVC2, CVV2 or CID value
- PIN or PIN block
- Contents of a credit card’s magnetic stripe
Protected Health Information (PHI) - Covered under HIPAA

PHI is defined as any “individually identifiable” information that is stored by a Covered Entity, and related to one or more of the following:

- Past, present or future physical or mental health condition of an individual.
- Provision of health care to an individual.
- Past, present or future payment for the provision of health care to an individual.

PHI is considered “individually identifiable” if it contains one or more of the following identifiers:

- Name
- Address (all geographic subdivisions smaller than state including street address, city, county, precinct or zip code)
- All elements of dates (except year) related to an individual including birth date, admissions date, discharge date, date of death and exact age if over 89
- Telephone/Fax numbers
- Electronic mail addresses
- Social security numbers
- Medical record numbers
- Health plan beneficiary numbers
- Account numbers
- Certificate/license numbers
- Vehicle identifiers and serial numbers, including license plate number
- Device identifiers and serial numbers
- Universal Resource Locators (URLs)
- Internet protocol (IP) addresses
- Biometric identifiers, including finger and voice prints
- Full face photographic images and any comparable images
- Any other unique identifying number or characteristic that could indentify an individual

If the health information does not contain one of the above referenced identifiers and there is no reasonable basis to believe that the information can be used to identify an individual, it is not considered “individually identifiable” and; as a result, would not be considered PHI.
Data Handling Requirements
For each classification, several data handling requirements are defined to appropriately safeguard the information. It’s important to understand that overall sensitivity of institutional data encompasses not only its confidentiality but also the need for integrity and availability.

The following table defines required safeguards for protecting data and data collections based on their classification. In addition to the following data security standards, any data covered by federal or state laws or regulations or contractual agreements must meet the security requirements defined by those laws, regulations, or contracts.

<table>
<thead>
<tr>
<th>Security Control Category</th>
<th>Data Classification</th>
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<tr>
<td>Tier 3-Public</td>
<td>Tier 2-Internal</td>
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<tr>
<td>Access Controls</td>
<td>No restriction for viewing Authorization by Data Owner or designee required for modification; supervisor approval also required if not a self-service function</td>
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<tr>
<td>Copying/Printing (applies to both paper and electronic forms)</td>
<td>No restrictions</td>
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</table>
| **Network Security** | May reside on a public network  
Protection with a firewall recommended  
IDS/IPS protection recommended  
Protection only with router ACLs acceptable | Protection with a network firewall required  
IDS/IPS protection required  
Protection with router ACLs optional  
Servers hosting the data should not be visible to entire Internet  
May be in a shared network server subnet with a common network server ruleset for the set of servers | Protection with a network firewall using "default deny" ruleset required  
IDS/IPS protection required  
Protection with router ACLs optional  
Servers hosting the data cannot be visible to the entire Internet, nor to unprotected subnets like the residence halls and guest wireless networks  
Must have a firewall ruleset dedicated to the system  
The firewall ruleset should be reviewed periodically |
| **System Security** | Must follow general best practices for system management and security  
Host-based software firewall recommended | Must follow University-specific and OS-specific best practices for system management and security  
Host-based software firewall required  
Host-based software IDS/IPS recommended | Must follow University-specific and OS-specific best practices for system management and security  
Host-based software firewall required  
Host-based software IDS/IPS recommended |
| **Virtual Environments** | May be hosted in a virtual server environment  
All other security controls apply to both the host and the guest virtual machines | May be hosted in a virtual server environment  
All other security controls apply to both the host and the guest virtual machines  
Should not share the same virtual host environment with guest virtual servers of other security classifications | May be hosted in a virtual server environment  
All other security controls apply to both the host and the guest virtual machines  
Cannot share the same virtual host environment with guest virtual servers of other security classifications |
<p>| Physical Security | System must be locked or logged out when unattended | Host-based software firewall recommended | System must be locked or logged out when unattended Hosted in a secure location required; a Secure Data Center is recommended | System must be locked or logged out when unattended Hosted in a Secure Data Center required Physical access must be monitored, logged, and limited to authorized individuals 24x7 |
| Remote Access to systems hosting the data | No restrictions | Access restricted to local network or VPN Remote access by third party for technical support limited to authenticated, temporary access via direct dial-in modem or secure protocols over the Internet | Restricted to local network or secure VPN group Unsupervised remote access by third party for technical support not allowed Two-factor authentication recommended |
| Data Storage | Storage on a secure server recommended Storage in a secure Data Center recommended | Storage on a secure server recommended Storage in a secure Data Center recommended Should not store on an individual’s workstation or a mobile device | Storage on a secure server required Storage in Secure Data Center required Should not store on an individual workstation or mobile device (e.g., a laptop computer); if stored on a workstation or mobile device, must use whole-disk encryption Encryption on backup media required Paper/hard copy: do not leave unattended where others may see it; store in a secure location |
| Transmission | No restrictions | No requirements | Encryption required (for example, via SSL or secure file transfer protocols) Cannot transmit via e-mail unless encrypted and secured with a digital signature |
| Backup/Disaster Recovery | Backups required; daily backups recommended | Daily backups required Off-site storage recommended | Daily backups required Off-site storage in a secure location required |</p>
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<thead>
<tr>
<th>Media Sanitization and Disposal (hard drives, CDs, DVDs, tapes, paper, etc.)</th>
<th>No restrictions</th>
<th>Recycle Reports; Wipe/erase media</th>
<th>Shred reports; Destruction of electronic media</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training</td>
<td>General security awareness training recommended</td>
<td>General security awareness training required; Data security training required</td>
<td>General security awareness training required; Data security training required; Applicable policy and regulation training required</td>
</tr>
<tr>
<td>Auditing</td>
<td>Not needed</td>
<td>Logins</td>
<td>Logins, access and changes</td>
</tr>
<tr>
<td>Mobile Devices</td>
<td>Password protection recommended; locked when not in use</td>
<td>Password protected, locked when not in use</td>
<td>Password protected, locked when not in use, Encryption used for Level 3 data</td>
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