

**Emma Eccles Jones College of Education & Human Services**

**POLICY INFORMATION**

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Safeguard: <b>Administrative</b>	Approved by: <b>Dean Beth E. Foley</b> 	Date Approved:  9/19/2016

**I. POLICY STATEMENT**

In accordance with CFR 164.308(a)(8) all CEHS security policies, standards and procedures will be evaluated on a periodic basis to ensure continued viability in light of technological, environmental, or operational changes that could affect the security of EPHI.

**II. DEFINITIONS**

See HIPAA Privacy Policy 100

**III. AUTHORITY AND RESPONSIBILITIES**

CEHS has component units that are listed as a hybrid entity in accordance with USU's HIPAA Hybrid Covered Entity Declaration. Only the Health Care Component/HCC (i.e., covered functions) of CEHS must comply with this policy. All references in this policy to "CEHS" shall be construed to refer only to the health care component of CEHS.

**IV. PROCEDURES TO IMPLEMENT**

1. Under the direction of the CEHS Security Officer, the appropriate personnel will annually review the viability, appropriateness, and effectiveness the Security Policies and general approaches taken by each HCC in their Security Procedures.
2. The CEHS Security officer and HCCs will develop and recommend any necessary Security Policy or Security Procedure changes.
3. Any modification shall be documented and retained for six years starting from when the new policy goes into effect. [CFR 164.316(b)]
4. The policy evaluation process could be triggered by one or more of the following:
  - a. Changes in technology, environmental process, or business processes that may affect HIPAA Security Policies or Security Procedures.
  - b. Changes in the HIPAA Security Regulations or Privacy Regulations.
  - c. A serious security violation, breach, or other security incident.

**V. ATTACHMENTS**

N/A

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**VI. REFERENCES**

CFR 164.308(a)(8)

CFR 164.316(b)