


**GUAM MEMORIAL HOSPITAL AUTHORITY
ADMINISTRATIVE MANUAL**

APPROVED	RESPONSIBILITY	EFFECTIVE DATE	NUMBER	PAGE
	Information Technology Administrator (HIPAA Security Officer)	12/2004	6420-29	1 of 2
TITLE: EVALUATION POLICY				

PURPOSE:

The purpose is to perform a technical and non-technical evaluation, based initially upon the standards implemented in the HIPAA Security Rule and subsequently, in response to environmental or operational changes affecting the security of electronic protected health information (ePHI), that establishes the extent to which Guam Memorial Hospital Authority's security policies and procedures meet the requirements of the HIPAA Security Rule. This is a standard required under the Administrative Safeguards of the HIPAA Security Rule.

SCOPE:

This policy applies to all Guam Memorial Hospital Authority workforce members including, but not limited to full-time employees, part-time employees, trainees, volunteers, contractors, temporary workers, and anyone else granted access to sensitive information by Guam Memorial Hospital Authority.

POLICY:

Guam Memorial Hospital Authority will evaluate the technical and non-technical implementations of its Security Policies and procedures. This evaluation will be completed on an "as needed" basis, but not less than once a year. The purpose of this evaluation will be to determine the effectiveness of the Policies as well as to ensure compliance with state and federal regulations such as HIPAA.

This evaluation will occur annually, as well as when any of the following events occur:

- There is a change to any state or federal regulation that may affect the Security Policies
- There is a new state or federal regulation that may affect the Security Policies
- There has been a significant breach of security or other security incident within Guam Memorial Hospital Authority
- Any other time the HIPAA Security Officer or Hospital Management feels there is a need to evaluate the Security Policies at Guam Memorial Hospital Authority

Should a policy or procedure be found to be ineffective, missing, or otherwise flawed Guam Memorial Hospital Authority will:

- Amend (or add) the policy or procedure in a timely manner
- Communicate the new policy or procedure to the affected workforce members and ensure that they understand the changes

Reviewed: 01/2006
 Revised: 02/2006
 Approved: EMC 2/15/06

RESPONSIBILITIES:

The HIPAA Security Officer, under the delegated authority of the Hospital Administrator, will be responsible for ensuring the implementation of the requirements of Evaluation standard.

COMPLIANCE:

Failure to comply with this or any other security policy will result in disciplinary actions as per the Sanction Policy 6420-8. Legal actions also may be taken for violations of applicable regulations and laws such as HIPAA.

Evaluation is a standard (164.308 (a)(8)) in the Administrative Safeguards category of the HIPAA Security Rule.

PROCEDURES:

Procedures related to the Evaluation standard include:

- Contingency Plan
- Data Backup Plan
- Disaster Recovery Plan
- Emergency Mode Operations Plan
- Testing and Revision Procedures
- Applications and Data Criticality Analysis

REFERENCES:

- HIPAA Final Security Rule, 45 CFR Parts 160, 162, and 164, Department of Health and Human Services, <http://www.cms.hhs.gov/hipaa/hipaa2/regulations/security/default.asp>, February 20, 2003.
- CMS, "CMS Information Systems Security Policy, Standards and Guidelines Handbook", CMS, February 2002.
- International Standards Organization (ISO/IEC 17799:2000(E)).