H.1.B
HIPAA Security Regulations
Title: HIPAA Assignment of Security Responsibility Policy
Security Rule: 164.308(a) (2)

Purpose:
It is the policy of Emory University to identify and assign final HIPAA security responsibility to one individual. This HIPAA security official will be assigned the following responsibilities:

Requirements: The HIPAA security official must:
1. Ensure that the necessary and appropriate HIPAA related policies are developed and implemented to safeguard the integrity, confidentiality, and availability of EPHI within the covered entity and its business associates.
2. Ensure that the necessary infrastructure of personnel, procedures and systems is in place to develop and implement the necessary HIPAA related policies.
3. Ensure that the necessary infrastructure of personnel, procedures and systems is in place to monitor, audit, and review compliance with all HIPAA related policies.
4. Ensure that the necessary infrastructure of personnel, procedures and systems is in place to provide a mechanism for reporting incidents and HIPAA security violations.
5. Act as a spokesperson and single point of contact for all issues related to HIPAA security.

If the HIPAA Security Officer is not able to meet the requirements or a responsibility defined in this policy, or is no longer affiliated with Emory University, the aforementioned responsibilities will be assigned to a new HIPAA Security Officer.

The above responsibilities are currently assigned to Emory’s Chief Information Security Officer. If no one is assigned security responsibility this policy must be modified to document how the requirement for an assigned security responsibility will be met.

This policy and its procedures must be reviewed and evaluated on a periodic basis to ensure that they maintain their technical viability and effectiveness.

Non-compliance with this policy may result in disciplinary action, up to and including termination of employment and/or criminal prosecution.

See: HIPAA Security Regulations: Sanction Policy

Recommended By: Emory HIPAA Security Working Group