



## ESSENT HEALTHCARE, INC.

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<b>Section:</b>	<b>Information Technology</b>	<b>Effective Date:</b>	<b>4/20/05</b>
<b>Subject:</b>	<b>Ongoing Monitoring &amp; Admin.</b>	<b>Revision Date:</b>	<b>4/20/05</b>
<b>Policy #:</b>	<b>ISP-014</b>	<b>Review Date:</b>	<b>6/26/08</b>
<b>Responsible Party:</b>	<b>Chief Information Officer</b>	<b>Revision #:</b>	<b>1</b>

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**Scope:**

**This policy applies to all Information Technology and Corporate Compliance Personnel.**

**Purpose:**

**This policy outlines the requirements for ongoing monitoring and maintenance of the HIPAA security compliance program.**

**Policy:**

**It is the policy of Essent to maintain an effective compliance program for the HIPAA. The HIPAA compliance program shall be comprised of the following seven elements: Oversight, Written Standards, Reporting Mechanism, Training and Education, Auditing and Monitoring, Response and Prevention Activities, and Enforcement and Discipline.**

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**Procedures:**

1. The Corporate Compliance Officer shall maintain an effective HIPAA compliance program as a supplement to the Corporate Compliance Program.
2. All policies and procedures implemented in response to the HIPAA legislation shall become a part of the HIPAA compliance program.
3. The HIPAA compliance program shall be reviewed by the Corporate Compliance Officer (CCO) on an annual basis for effectiveness and appropriateness.
4. The Chief Security Officer (CSO) and the Facility security Officers (FSO) are responsible for the day-to-day operation of the HIPAA compliance program including implementation of policies and procedures, conducting user training, and ongoing monitoring.
5. The CSO/FSO shall conduct periodic risk assessments to identify threats and vulnerabilities to Essent's information systems and implement measures to eliminate/minimize those threats and vulnerabilities.
6. The CSO/FSO shall conduct periodic system and application inventories to ensure that the HIPAA compliance program appropriately encompasses all of the systems and applications that access PHI.
7. The CSO/FSO shall conduct periodic system user reviews to ensure that access is being limited to only those individuals with a legitimate business need to access the information.



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**References:**

HIPAA Subpart C

OIG Compliance Guidance for Hospitals