

 <p>HAWAII HEALTH SYSTEMS C O R P O R A T I O N "Touching Lives Everyday"</p> <p>Policy</p>	Department: Information Technology Department	Policy No.: ITD 0017
	Issued by: Barbara Kahana Vice President & CIO	Revision No.: 1
Subject: <i>Electronic Mail</i>	Approved by: Thomas M. Driskill, Jr. President & CEO	Effective Date: 10/04/04
		Supersedes Policy: ITD 0001
		Page: 1 of 2

- I. **PURPOSE:** This policy defines appropriate standards for secure and effective use of electronic mail (e-mail). It is based on final HIPAA security rule requirements and generally acknowledged IT best practices.
- II. **POLICY:** E-mail is to be used as a business tool to facilitate communication and information exchange required by users of the HHSC e-mail system. The following provisions shall apply to e-mail use. This list is not exhaustive, and other provisions may be applied in accordance with future business use or statutory requirements:
 - The enterprise e-mail system is owned by and maintained by HHSC to satisfy its business needs. Therefore all e-mail messages stored on the HHSC e-mail system is the property of HHSC.
 - To maintain security of the HHSC computer network, only the following types of e-mail accounts are approved for use:
 - HHSC e-mail system accounts
 - Business related external web-based e-mail accounts approved by department managers and ITD management
 - Web-based and third-party ISP e-mail accounts may not be accessed through the HHSC network, except where approved for business purposes.
 - Automatic forwarding of HHSC e-mail system account messages to any external e-mail account is prohibited.
 - HHSC e-mail system accounts may be accessed by system administrators to maintain the integrity and security of the HHSC e-mail system.
 - E-mail messages that contain Protected Health Information (PHI) must not be sent to recipients outside of the HHSC e-mail system, unless encrypted by HHSC approved encryption methods.
 - Prohibited e-mail content practices include, but are not limited to:

- The sending of any chain-letter messages, discriminatory, obscene, derogatory, defamatory, or any other types of inappropriate messages that may contain sexually explicit material, ethnic or racial slurs, or anything that could be interpreted as disparaging of others based on race, national origin, gender, sexual orientation, age, disability, and religious or political beliefs.
- To enforce prohibited e-mail content compliance, HHSC executive Corporate management reserves the right to approve monitoring of user e-mail messages.

III. SCOPE: This policy applies to any user with an e-mail account on the HHSC e-mail system.

IV. RESPONSIBILITIES: The Corporate Information Security Officer (CISO), under the direction of the Corporate Information Officer (CIO) will be responsible for operationalizing the provisions delineated in this policy.

V. DEFINITIONS

- **PHI:** Protected Health Information is individually identifiable health information that identifies an individual and includes demographic information, and relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual.