

**LSU HEALTH CARE SERVICES DIVISION
BATON ROUGE, LA.**

POLICY NUMBER: 0517-24

CATEGORY: Administrative Services

CONTENT: Cellular Equipment and Mobile Device

APPLICABILITY: This policy applies to all employees of the HCSD headquarters and Lallie Kemp Medical Center (LKMC) including classified employees, unclassified employees, students, contractors and agents of HCSD and LKMC who wish to use an HCSD or LKMC issued mobile device or who wish to connect a personal mobile device to the HCSD or LKMC IT Infrastructure.

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Note: Approval signatures/titles are on the last page

**LSU HEALTH CARE SERVICES DIVISION (HCSD)
CELLULAR EQUIPMENT AND WIRELESS DEVICE POLICY**

I. STATEMENT OF POLICY

The use of and reimbursement for cellular equipment and mobile devices by HCSD is to assure that appropriate employees have immediate access to communications service under one or more of the following circumstances:

- Work assignments that require frequent travel;
- Work assignments that routinely involve the potential need for HCSD related business communications;
- Other situations when patient care, employee safety, or operational issues are a factor.

Access by cellular equipment and mobile devices must occur through a means that maintains the security and integrity of the data. Therefore, HCSD employees must agree to the terms and conditions of this policy prior to connecting a personally owned mobile device to the HCSD IT Infrastructure or accessing any HCSD IT system or application.

Reimbursement for use of cellular equipment and mobile devices is taxable and will be reported as income on W-2.

Note: Any reference herein to Health Care Services Division also applies and pertains to Lallie Kemp Medical Center.

II. PURPOSE

The purpose of this policy is to provide guidelines for:

- A. Establishing and documenting the need for cellular equipment and mobile devices;
- B. Protecting the security and integrity of HCSD data and technology infrastructure;
- C. Obtaining agency approval for reimbursement for use of a personal device for business matters;
- D. Limiting and controlling cellular equipment and mobile device use to HCSD business related matters concerning patient/employee care, safety, and well-being or HCSD operational business matters.

III. IMPLEMENTATION

This policy and subsequent revisions to the policy shall become effective upon approval and signature of the HCSD Chief Executive Officer or Designee.

IV. GENERAL

- A. HCSD recognizes two (2) cellular equipment and mobile device options:
 - 1. Issuance of an HCSD owned cellular phone, tablet computer and/or hotspot device (such as a MiFi) will be made on a limited basis where warranted by special circumstance. Responsibility for controlling, safeguarding, and maintaining HCSD cellular equipment and wireless devices will rest with the employee using the HCSD equipment.
 - 2. Reimbursement for use of a personal cellular phone. Reimbursement for a personal cellular phone will be made on a limited basis where warranted by special circumstance. Connectivity to the HCSD Network from a personal cellular phone will require adherence to the HCSD security requirements.
 - 3. All requests for issuance of HCSD owned equipment must be justified by describing the benefit to be gained from its availability and use.

- B. Employee Email/Text Usage on Cellular Equipment and Mobile Devices:
 - 1. Non-exempt employees who receive work-related emails or texts outside of their official work schedule or while in an approved leave status shall not take any action on such emails or texts, unless directed to do so by their Supervisor or higher.
 - 2. Employees having access to email and/or text capability on their personal devices that has NOT been authorized by HCSD for HCSD business, are not required to respond to such email and/or text, and shall not be reimbursed for cellular service.
 - 3. Employees issued HCSD cellular equipment of mobile devices should conduct all HCSD business from the HCSD issued device.

V. EXPECTATION OF PRIVACY

- A. Employees shall have no expectation of privacy at any time they are using personal cellular equipment, a personal mobile device or HCSD issued cellular equipment or mobile device to access any HCSD data or IT systems, regardless of whether the data was generated as the result of authorized use, incidental use, or if the use is not permitted by or described by this Policy.
- B. HCSD may access, monitor, or disclose, as HCSD deems appropriate, any HCSD data or transmission of HCSD data, (including confidential or personal information), without notice to or consent from the employee for any reason.
- C. HCSD, at its discretion, may disclose the results of any such monitoring to appropriate HCSD or LSUHSC-NO personnel, law enforcement, investigating agencies and may use those results in appropriate external and internal disciplinary actions and other proceedings.
- D. By using personal cellular equipment, a personal mobile device or HCSD issued cellular equipment or mobile device to access the HCSD IT Infrastructure, all employees acknowledge that they are subject to the terms of this policy and give their unrestricted consent to the monitoring, copying, and unrestricted distribution

of any transmission/communication or image generated, received by, or sent by a computing device or application on the HCSD IT Infrastructure.

VI. MANAGEMENT RESPONSIBILITY

- A. Requests for reimbursement for personal cellular phones or issuance of HCSD equipment must be submitted to and approved by, for HCSD Headquarters the HCSD Chief Executive Officer or designee, or for Lallie Kemp Medical Center the Hospital Administrator or designee.
- B. The offices/facilities issuing HCSD owned equipment shall be responsible for familiarizing employees with the operations of the equipment and ensuring the equipment is used appropriately. Any potential abuse or misuse of HCSD issued equipment will be investigated and appropriate action will be taken.

VII. ACCEPTABLE USE

- A. HCSD employees using HCSD issued or personally owned cellular equipment or mobile devices for HCSD business must follow HCSD Cellular Equipment and Mobile Device Policy, 0517.
- B. HCSD employees using HCSD issued cellular equipment or mobile devices shall only use the device for HCSD business and must adhere to HCSD Internet Use Policy, 4512, and HCSD E-Mail Policy, 4511. Employees shall not use HCSD issued cellular equipment as a personal cellular equipment and shall not use this equipment for personal emails or texts, nor can it be used to store personal information, photos, etc.
- C. HCSD employees using personally owned cellular equipment or mobile devices to connect to the HCSD IT Infrastructure must adhere to HCSD Internet Use Policy, 4512, while connected to the HCSD IT Infrastructure.
- D. HCSD employees using personally owned cellular equipment or mobile devices to access the HCSD E-Mail system must adhere to the HCSD Email Policy, 4511.
- E. HCSD employees using HCSD issued or personally owned cellular equipment or mobile devices to conduct HCSD business shall do so in an ethical manner, following the HCSD Code of Conduct Policy, 8501.
- F. HCSD employees must understand and follow the acceptable use of a personal computing device as detailed in LSU HCSD Policy 0517, LSUHSC-NO CM-42 and LSUHSC-NO EIS-100, while the device is connected to the LSU HCSD network infrastructure. This includes but is not limited to:
 - 1. Employees **SHALL**,
 - a. Comply with all federal and state laws, LSU System, LSUHSC and/or HCSD rules and policies, terms of computing contracts, and software licensing rules.
 - b. Obtain authorization to use LSUHSC and/or HCSD computing resources from the owner of the resource.
 - c. Be held responsible for the use of their assigned Network User ID

and any and all actions that are performed with that ID, including from personal cellular equipment and mobile devices.

- d. Actively participate and cooperate with the IT Department in the protection of the HCSD IT Infrastructure against threats by using virus-scanning software, not opening E-mail from an unknown source, safeguarding passwords, diligently assessing multi-factor authentication (MFA) requests for appropriate response, reporting any violations of the acceptable use statement to the local IT support staff, and cooperating with the local IT support staff to keep security patches up to date on applications, cellular equipment and mobile devices, and computers, and staying abreast of new security issues by completing information security training. Anyone suspecting they may have a computer virus should contact their local IT support staff immediately.
- e. Register personally owned cellular equipment and mobile devices that connect with HCSD IT Infrastructure with the LSUHSC mobile device management system (MDM).
- f. Take reasonable precautions to prevent unauthorized access to or disclosure of protected and restricted information stored on cellular equipment or a mobile device.

2. Employees **SHALL NOT**,

- a. Reveal their LSU User ID's password to anyone.
- b. Engage in any activity that jeopardizes the availability, performance, integrity, or security of the HCSD IT Infrastructure.
- c. Use computing resources in a wasteful manner that creates a direct cost to HCSD.
- d. Use HCSD IT resources for personal monetary gain or commercial purposes not directly related to HCSD business or for functions that are not related to one's job.
- e. Use the Guest Wireless Network for personal use during work hours.
- f. Store unencrypted User IDs and passwords that allow access to the HCSD IT Infrastructure on cellular equipment or mobile devices.
- g. Allow others access to HCSD data from cellular equipment or mobile devices.
- h. Use HCSD issued cellular equipment as a personal cellular equipment and shall not use this equipment for personal emails or texts, nor can it be used to store personal information, photos, etc.
- i. Use cellular equipment or mobile devices to photograph or record patients, unless using Epic Haiku or Canto and only with the written consent from the patient per hospital policy.

- j. Use cellular equipment or mobile devices for work while driving, unless the manner of use complies with local traffic laws.

VIII. OWNERSHIP OF DATA AND APPLICATIONS

- A. HCSD data and systems accessed from cellular equipment and mobile devices are, at all times, the property of HCSD.
- B. HCSD employees must allow HCSD IT and Compliance staff access to any cellular equipment or mobile device used to access HCSD data, for the purpose of security and compliance investigations.
- C. Personal cellular equipment or mobile devices used to access HCSD IT Infrastructure could potentially contain HCSD data or applications. HCSD Personnel must allow HCSD IT to protect HCSD data and applications. Personal information may be lost should HCSD IT remote wipe personal cellular equipment or mobile device to protect HCSD data and applications. (for example, lost or stolen cellular equipment or mobile devices may require a remote wipe)
- D. Unauthorized use, duplication, or access of HCSD data is grounds for disciplinary action up to and including termination, as well as, potential civil or criminal proceedings

IX. SECURITY

LSU HCSD issued equipment requiring an Apple ID or Google Play ID shall have the Apple ID or Google Play ID configured using an HCSD email address.

LSU HCSD employees must work with HCSD IT to ensure HCSD issued equipment is maintained in good working order. This includes, but is not limited to, performing certain actions, as requested by IT, in a timely manner, and making the device available to IT as required and in a timely manner.

LSU HCSD employees shall never configure the Apple ID or Google Play ID on personal cellular equipment or mobile devices using an HCSD email address.

LSU HCSD employees must ensure any personal cellular equipment or mobile device used for LSU HCSD business or connected to LSU HCSD IT infrastructure meet all requirements for protecting and securing the device, as detailed in LSU HCSD Policy 0517 and LSUHSC-NO EIS-100, including, but not limited to:

- A. Any device accessing HCSD data or IT infrastructure shall have encryption enabled (including storage media, such as USB hard drives or memory sticks, SD or CompactFlash cards, and any peripherals connected to a device).
- B. Any device accessing HCSD data or IT infrastructure shall be configured to check for and apply both operating system and application updates and patches at least weekly.
- C. Any device accessing HCSD data or IT infrastructure capable of using antivirus

or antimalware software shall have the software installed and configured to regularly update the software and virus signatures.

- D. Any device accessing HCSD data or IT infrastructure shall be capable of locking the screen and shall have this feature configured, such that unlocking requires the use of PIN, passcode, biometric, or password. Devices that support an automatic wipe should be set so that HCSD data is wiped after 10 invalid unlock attempts.
- E. Any device accessing HCSD data or IT infrastructure shall be configured with an automatic lock after inactivity of no more than 10 minutes and must require a PIN, passcode, biometric or password to unlock.
- F. Backups of any device accessing HCSD data shall also be encrypted.
- G. Reasonable care shall be taken to avoid the unauthorized access to, or disclosure of, the information stored on, or accessed by, any device used to access HCSD data.

X. SEPARATION

If you leave HCSD by termination, retirement, resignation, transfer, or any other reason, you shall return all state owned equipment and other state assets on or before last day on duty, or as directed. Failure or refusal by you to return state issued equipment shall be reported to the appropriate law enforcement agency.

The Apple ID and Google Play passwords for any HCSD issued cellular equipment or mobile devices must be provided to HCSD when the device is returned.

All HCSD data and HCSD licensed applications must be removed from personally owned cellular equipment or mobile devices immediately upon separation from HCSD.

XI. RISKS/LIABILITIES/DISCLAIMERS

HCSD employees using HCSD issued or personally owned cellular equipment or mobile devices agree to the following conditions:

- A. HCSD employees cannot hold HCSD or HCSD IT personnel liable for data losses related to data security and/or remote wipes (whether due to a lost/stolen device or employment termination).
- B. HCSD has the right to disconnect employee devices and/or disable work related applications and services to the HCSD IT Infrastructure without notice.
- C. HCSD employees must report stolen devices to HCSD as soon as a device is known to be stolen.
- D. Lost devices are considered lost if the device is missing for a 24-hour period. HCSD employees must report lost devices to HCSD as soon as the device is considered lost.
- E. HCSD employees assume all costs associated with personally owned cellular equipment or mobile devices, unless explicitly outlined in this policy.
- F. HCSD employees assume full liability for personal data losses, OS crashes, errors, bugs, malware, viruses, etc., that occurs with personally owned cellular

equipment or mobile devices.

- G. Violations of this Cellular Equipment and Mobile Device Policy, LSU HCSD Policy 0517, could result in disciplinary actions up to and including termination and civil/criminal proceedings.

XII. PROCEDURES FOR HCSD PROVIDED EQUIPMENT

- A. Requests for HCSD issued equipment must be submitted to, and approved by, for HCSD Headquarters the HCSD Chief Executive Officer or designee, or for Lallie Kemp Medical Center the Hospital Administrator or designee, **prior** to receiving the HCSD issued equipment. (See Attachment #1)
- B. If approved, employee will complete and sign the Acknowledgement Form. (See Attachment #2)
- C. Approved copies of Attachment #1 and Attachment #2 shall be submitted to HCSD Information Technology Department.
- D. When assigned, it is the responsibility of the employee to prevent misuse, damage, and theft of the equipment.
- E. Any missing equipment will be the responsibility of the employee, pending investigation of the loss.
- F. Approved employees receiving cellular phones or tablet computers will receive email capable equipment from a list of supported equipment. The cellular phones and tablet computer will come with unlimited data for business purposes.
- G. HCSD has the discretion to charge the employee for misuse, non-returned, damaged, lost or stolen equipment.
- H. HCSD hotspots will be provided to approved employees based on the requirement for laptop use to process data to meet their job functions, when outside direct connection to the HCSD network. These hotspots have unlimited data access.
- I. Employees who have been issued HCSD equipment are not allowed to bring with them or use their equipment when they travel internationally. If a user feels that the equipment is necessary for business purposes, a request must be submitted to the HCSD Chief Executive Officer or designee **prior** to leaving the country.
- J. If you leave HCSD by termination, retirement, resignation, transfer, or any other reason, you shall return all state owned equipment and other state assets, including but not limited to the items listed below, on or before last day on duty, or as directed. Failure or refusal by you to return state issued equipment shall be reported to the appropriate law enforcement agency.
 - 1. HCSD issued cellular equipment - The Apple ID and Google Play passwords shall be provided when the device is returned.
 - 2. Personally owned cellular equipment or mobile devices - All HCSD data and HCSD licensed applications must be removed immediately upon separation from HCSD.

XIII. PROCEDURES FOR REIMBURSEMENT OF EMPLOYEE PERSONAL CELLULAR PHONE

Employees who qualify for reimbursement for use their personal cellular device for HCSD business, will receive a subsidy of \$50.00 per month, payable only if the following criteria are met:

- A. Requests for subsidy must be submitted to, and approved by, the HCSD Chief Executive Officer or designee prior to receiving the subsidy. A copy of the cellular contract or a copy of the employee's latest cellular phone bill shall be attached to the request as documentation. (See Attachment #1)
- B. If approved, employee will complete and sign the Acknowledgement Form. (See attachment #2)
- C. Approved copies of Attachment #1 and Attachment #2 shall be submitted to the HCSD payroll office. Reimbursement eligibility will become effective on the first day of the month in which the Chief Executive Officer approves plan.
- D. No later than January 15th of each calendar year, the employee shall submit proof of continued cellular phone contract to the employee's payroll office. The employee may use the front page of their cellular phone bill as proof of continued contract. Phone number on contract must match phone number on approval forms. This reimbursement is taxable and will be reported as income on W-2.
- E. Failure to provide the requested information by January 15th, may result in a loss of reimbursement.
- F. Employees will be reimbursed on an annual basis except under the following conditions:
 - In the event of resignation/retirement, lay off and/or separation of employment, the employee may claim and be allowed reimbursement for the amount deemed earned upon termination effective date.
- G. All HCSD data and HCSD licensed applications must be removed from personally owned cellular equipment or mobile devices immediately upon separation from HCSD.

XIV. EXCEPTIONS

The HCSD Chief Executive Officer or designee may waive, suspend, change, or otherwise deviate from any provision of this policy they deem necessary to meet the needs of the agency as long as it does not violate the intent of this policy; state and/or federal laws; Civil Service Rules and Regulations; LSU Policies/Memoranda; or any other governing body regulations.

Employee Acknowledgement of Cellular Equipment and/or Wireless Device Responsibilities

Name (print) _____ acknowledges that I have read and understand HCS D Policy 0517, Cellular Equipment and Wireless Device, and will comply with the provisions outlined within the policy.

Agency Provided Devices:

The device is for official HCS D business. Unauthorized downloads including, but not limited to, ring tones, music, roaming, long distance, international call, or other charges accrued that are clearly not HCS D related shall be charged back to the employee.

The device I am receiving:

___ AT&T Cellular Phone ___ Verizon Cellular Phone

___ AT&T Tablet ___ Verizon Tablet ___ Cellular Hot Spot (MiFi)

Number: _____ Serial Number: _____

I accept responsibility for the HCS D issued device. If an HCS D issued device should become lost, stolen, misused or damaged, I understand that I may be responsible for payment of the device.

If you leave HCS D by termination, retirement, resignation, transfer, or any other reason, you shall return all state owned equipment and other state assets on or before last day on duty, or as directed. Failure or refusal by you to return state issued equipment shall be reported to the appropriate law enforcement agency. The Apple ID and Google Play passwords shall be provided when the device is returned.

Employee Signature/Date: _____

Agency Authorization/Date: _____

Personally Owned Cellular Device: (initial each block below)

___ I am requesting compensation subsidy of \$50.00 per month for cell phone # _____. I understand this compensation subsidy is taxable and will be reported as income on W-2.

___ I understand that the subsidy will be reimbursed annually and not monthly

___ I agree to provide proof of continued cellular service no later than January 15th of each calendar year to receive the subsidy

___ I understand that failure to submit proof of continued cellular service later than January 15th of each calendar year, may cause me to be ineligible for the subsidy

___ I agree to comply with the HCS D security requirements for cellular access to HCS D email

___ I agree to utilize the encryption passcode of my phone.

___ Immediately upon separation from HCS D, all HCS D data and HCS D licensed applications must be removed from personally owned cellular equipment or mobile devices.

Employee Signature/Date _____

(Keep a copy of the completed form for your records and submit a copy of completed form as directed in the policy)

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